

“Clifton” Community Food Garden Sanctuary Point

Application for Membership

Full Name: _____

Address: _____

Occupation: _____ D.O.B: _____

Telephone Mobile: _____ Land Line: _____

E-mail: _____

Confirm E-mail: _____

Postal Address: _____

Doctors Name and Phone Number: _____

Next of Kin Name and Phone Number: _____

Should we know of any allergies: _____

Annual Membership Fees. Please tick appropriate boxes.

\$5 Joining Fee (Once only).

One person only from each family shall vote at meetings. Members wishing to have an individual vote can join as a separate member. All annual fees will be halved if you join after the 1st of December.

\$30 Family

\$18 Family Concession Pensioners, Concession Cards, Seniors.

\$20 Single Person

\$12 Single Person Pensioners, Concession Cards, Seniors.

Annual membership fees may be paid by instalments e.g. 4 x \$5 or 2 x \$6

Fees can be paid at the Garden on Tuesday and Saturday mornings, 9 to 12, and Friday afternoons from 3pm, or contact the Treasurer on 0413 837 538.

I agree to abide by the terms of the ‘Garden Constitution’ and ‘Policies and Procedures’ as set out on our website.

The ‘Garden Constitution’ and ‘Policies and Procedures’ are available to read on our website, www.cliftongarden.org or can be e-mailed to you upon request. Hard copies are available to read at the Garden.

Signature: _____ Date: _____

Form received by _____

Please circle in what ways you wish to participate in the Garden from the list below:

WEEDING	WATERING	PLANTING
DESIGN	MOWING	WHIPPER SNIPPING
EDUCATION AND WORKSHOPS	SUGGESTIONS FOR CROPS	COMPOSTING
FERTILISING	ADMINISTRATION	PUBLICITY
BUILDING	RESEARCH	WORM FARMING
GROWING HERBS	PEST CONTROL	RECORD KEEPING
MAKING PRESERVES		

Do you have any skills that may be useful to the Garden?

“Can you suggest any resources or contacts that might be useful to the Garden?”
