



City of Fairfax, Virginia

PARKS AND RECREATION

10455 Armstrong Street • Room 123 • Fairfax, VA 22030-3630
 P 703.385.7858 • F 703.246.6321 • www.fairfaxva.gov

APPLICATION FOR COMMUNITY GARDEN PLOT

Please complete and submit to the City of Fairfax Parks and Recreation Department.

Email: ParksRec@fairfaxva.gov | Fax: 703.246.6321

Please check all that apply:

- Application Type New* Renewing Waitlist
- Garden Location City Hall, 10455 Armstrong Street Kutner Park, 3901 Jermantown Road
- Plot Size Full (10' x 10') - \$60

* A \$50 refundable security deposit is required for new gardeners. Security deposits will be billed at the time of plot assignment; please **do not** send security deposits in advance.

GARDENER INFORMATION

Gardener Name _____
(First Name) (Surname)

Address _____
(Street) (City/Town, State) (Zip Code)

Telephone _____
(Home) (Mobile)

Email _____

CO-GARDENER INFORMATION

Co-Gardener Name _____
(First Name) (Surname)

Telephone _____
(Home) (Mobile)

Email _____

Co-Gardener Name _____
(First Name) (Surname)

Telephone _____
(Home) (Mobile)

Email _____

FOR OFFICE USE ONLY

Date Received _____ Date Paid _____ Check No. _____



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PARTICIPANT AGREEMENT

I will maintain plantings in my garden plot and keep it planted throughout the year.

If I must abandon my plot for any reason, I will notify the Parks & Recreation Department.

I will keep weeds at a minimum and maintain the areas immediately surrounding my plot, if any.

If my plot becomes unkempt, I understand I will be given 2 weeks' notice to clean it up. At that time, it will be re-assigned or tilled in.

I will keep trash and litter out of the plot, as well as from adjacent pathways and fences. I will participate in the fall cleanup of the garden.

I will plant tall crops where they will not shade neighboring plots.

I will only harvest my own crops unless given permission by another plot user.

I will not use fertilizers, insecticides or weed repellents that will in any way affect other plots.

I will not bring pets to the garden.

I will not play music while at the garden (unless using headphones). I understand the

City of Fairfax is NOT responsible for my actions.

I AGREE TO HOLD HARMLESS THE CITY OF FAIRFAX FOR ANY LIABILITY, DAMAGE, LOSS OR CLAIM THAT OCCURS IN CONNECTION WITH USE OF THE GARDEN BY ME OR ANY OF MY GUESTS.

Primary Gardener Signature

Date

Co-Gardener Signature

Date

Co-Gardener Signature

Date

Plot No. _____



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Community Garden Plot Payment Form

Please complete and submit to the City of Fairfax Parks and Recreation Department.

Email: ParksRec@fairfaxva.gov

If accepted into the program, I authorize the use of my credit card (if supplied below) for the payment of plot fee(s) and security deposit (if applicable).

Credit Card:

Visa Discover American Express MasterCard

Credit Card #: _____ Exp. Date: _____ CVC: _____

Signature: _____ Date: _____

Check (make payable to "City of Fairfax"):

Check/Money Order #: _____