Membership Application for South Coast Community Garden Association (SCCGA) for Gardeners at Bandon Good Earth Community Garden

Membership is open to all people on an equal opportunity basis.

Names of all Gardeners: _________________________________________________
Address: ____________________________________________________________
Telephone: ________________________ Cell Phone: ________________________
Email Address: ________________________________________________________

Basic SCCGA Membership dues are $10 per calendar year and are not prorated for memberships beginning during the calendar year. Dues are payable with your application.

Annual SCCGA Membership Dues: (tax-deductible) ☐ New Member ☐ Renewing Member
☐ $10 Basic SCCGA dues ☐ $10 Additional Member dues Total Dues: $______

Bandon Garden Plot Rental: for those gardening ☐ I am a Master Gardener
Bandon Good Earth Garden Plot Application Fee Plot Fee: $25

Additional Donation: Optional. Please donate at the level most appropriate for you. Thank you.
Additional Tax-deductible donation to Good Earth Garden Donation: $______

Make check payable to Good Earth Community Garden. Check # _____ Total Enclosed: $______

Please submit Bandon’s Garden Plot Application Form along with this SCCGA Membership Application Form and all payments to the Good Earth Community Garden for processing.

Mail to: Good Earth Community Garden, P.O.Box 1155, Bandon, OR 97411

Waiver of Liability
I WAIVE and RELEASE for myself, my heirs, executors and assigns, the South Coast Community Garden Association, its agents, and volunteers and the owners of the garden lands from any and all claims, losses, expenses, or liability on account of damage, injury or death, intentional or negligent, that could result from my participation or my family’s or my guests’ participation in the community garden program. I will also assume and pay my own medical and emergency expenses in the event of an accident, illness or other incapacity incident to or arising from my participation in the community garden. I also understand that the community garden program may take photographs of me in the garden for the purpose of program publicity.

Signature(s) of all gardeners: ___________________ ___________________ Date: ______

SCCGA Office Use: Member dues received $______ Additional donations to SCCGA $______
The South Coast Community Garden Association is an Oregon non-profit corporation registered as a tax-exempt public charity under 501(c)(3) of the Internal Revenue Code. It operates exclusively for the charitable, scientific, literary and educational purposes for the education of the community on gardening and for providing and managing a place for people of the community to grow produce and other plants for personal use, not commercial use.

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