

Mentone Community Garden Club Inc

Membership Application Form

Please send completed form to mcgcinc@gmail.com.
A committee member will contact you when a plot is available.
Payment will be accepted when a plot is allocated.

Applicant's Name: Mr/ Mrs /Ms _____

Address: _____

Post Code _____

Phone: (home) _____ (bus) _____ (mob) _____

Email: _____

Preferred way to be contacted: _____

Emergency Ph Contact: _____ Relationship: _____

I confirm that

I live permanently at the above address

I am applying only for myself

I agree to abide by Community Garden Rules.

I am prepared to be involved as required in working bees at the garden

I agree to pay the annual fees within 4 weeks of the AGM.

Privacy Statement: The personal information requested on this form is being collected by the Committee for reference and identification purposes. To ensure confidentiality of information requested we will only use your information for the purpose of providing access & communication of facilities and equipment. We will not disclose your personal information without your consent to a third party, institution or authority except where required by law or other regulation.

Plot \$25 7 x 2.5m (approx)

Once off joining fee for new members \$15

Signature of Applicant _____

Date ____/____/____

Application approval _____

Date ____/____/____

President of Mentone Community Garden Club

Paid by Cheque Cash

Date ____/____/____

OFFICE USE ONLY:

Accepted Plot # allocated _____