

Shared Herbal Garden Application

Please complete the following information and return to:

North River Fronts Neighborhood Assn.

CO: Forest St. Community Garden

529 Hobart St.

Eau Claire, WI 54703

*Payment, if not made online, must be submitted with this form.

Member Name: _____

Additional Members (for Family Membership only): _____

Address: _____

Phone Number: () _____ - _____

Email: _____ @ _____

I am / We are interested in joining as of:

Before April, 2025

Single Membership \$25.00

Family Membership \$40.00

April 1 – May 16, 2025

Single Membership \$30

Family Membership \$45

After May 17, 2025

Single Membership \$35

Family Membership \$50

Payment is non-refundable

Make check payable to: North River Fronts Neighborhood, Assn.

Note in the memo section: "Shared Herbal Garden"

Welcome Statement: The Shared Herbal Garden is a community of individuals who focus on building community, honoring nature, creating space for native pollinators, animals, birds, etc, and growing, sharing, and learning about the place different herbs can have in our lives. We encourage everyone to participate in ways they are able whether in or out of the garden. Join us to learn more about our many plant allies in the world around us.

HOLD HARMLESS / STATEMENT OF AGREEMENT

The City of Eau Claire and North River Fronts Neighborhood, will not be responsible for any accidents, injuries, or damages, nor will the City of Eau Claire or North River Fronts Neighborhood be responsible for any theft, damage to, loss of, or replacement of any belongings, equipment, materials, or tools, or plantings. There is no security for any personal belongings. Failure to follow any garden or public area rules and regulations may result in loss of membership.

Memberships are non-transferable. Members may seek to re-establish gardening privileges and will work with the Membership Association to do so. The member will not be eligible for any refund or reimbursement for any materials. Please make sure that you have read and understand the attached guidelines and membership expectations, and sign below indicating that you agree to the rules and conditions.

Signature: _____

Date: _____