

**GARDEN LEADER, PLEASE COMPLETE AND RETURN TO YOUR PROPERTY MANAGEMENT OFFICE**

BOROUGH \_\_\_\_\_ DEVELOPMENT NAME \_\_\_\_\_

MANAGER \_\_\_\_\_ SUPERINTENDENT \_\_\_\_\_

GARDEN LEADER'S NAME (please print) \_\_\_\_\_ TELEPHONE NO. (    ) \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT. # \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

If you do not have email, please provide an email address for a family member who does have email on the line above so that we may communicate with you about free garden resources and events when opportunities arise.

Can you speak and understand English?  Yes  No If you answered **NO**, what language would you prefer to receive communication? (check only one)

- kreyòl ayisyen  
 中文  
 Français  
 Español  
 한국의  
 বাংলা  
 русский  
 Other \_\_\_\_\_

HOW MANY YEARS HAVE YOU PARTICIPATED IN THE CITYWIDE GARDEN COMPETITION? \_\_\_\_\_ OR 1<sup>ST</sup> TIME? \_\_\_\_\_

Are you a member of a Resident Association / Resident Green Committee? YES  NO

President of Resident Association / Resident Green Committee Captain name: \_\_\_\_\_

**GROUP MEMBERS** (Attach an additional sheet if more space is necessary.)

NAME	AGE*	ADDRESS	TELEPHONE NO.

*\*Include the age for Group Members 16 years or younger. Please write in **Senior** if applicable*

**You may enter a maximum of 3 competitive gardens, with no more than two of the same type. However, there is no restriction on the type and amount of non-competitive gardens you may enter.**

**Please circle the primary category of the Garden.**

**FLOWER / VEGETABLE/ THEME**     COMPETITIVE                       NON-COMPETITIVE

GARDEN'S NAME \_\_\_\_\_

LOCATION/ADDRESS \_\_\_\_\_

*(Example: 227 E. 153<sup>rd</sup> St., to the right of Community Center entrance.)*

APPROVED                       NOT APPROVED

**FLOWER / VEGETABLE/ THEME**     COMPETITIVE                       NON-COMPETITIVE

GARDEN'S NAME \_\_\_\_\_

LOCATION/ADDRESS \_\_\_\_\_

*(Example: 227 E. 153<sup>rd</sup> St., to the right of Community Center entrance.)*

APPROVED                       NOT APPROVED

**I have read, understood and agree to follow the Garden & Greening Program's Participation and Competition Rules as stated herein.**

GARDEN LEADER'S SIGNATURE: \_\_\_\_\_

PROPERTY DEVELOPMENT MANAGER OR SUPERVISOR'S SIGNATURE: \_\_\_\_\_

*(We encourage Garden Leaders and either Property Development Managers or Supervisors to retain a photocopy for your records.)*

**MANAGEMENT, PLEASE FORWARD A COPY OF THIS FORM VIA INTEROFFICE TO:**  
COMMUNITY PROGRAMS & DEVELOPMENT - Resident Engagement - Garden & Greening Program  
90 Church Street, 5<sup>th</sup> Floor                      New York, NY 10007

**FOR COMMUNITY OPERATIONS USE ONLY**