

Huntington Beach Community Garden Volunteer Application

All information in this document is confidential: Please Print

Today's Date: _____

The mission of the Huntington Beach Community Garden (HBCG) is to educate children and adults about organic gardening and to provide an area where individuals and families can grow fruit, vegetables, flowers, and herbs for their own use and for the use of local food banks. Almost any skill is needed and appreciated. Appropriate experiences are available for those wishing to enhance and maintain professional skill sets.

Contact Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

What day and times would you prefer to volunteer? _____

What is the best time for us to contact you? _____

Put a checkmark by your Interest.

<input type="checkbox"/>	Communications Committee: Maintain the garden's social media, internet presence, newsletter, Website design, content writing and photos.
<input type="checkbox"/>	Garden Event Committee: Plan promotional events for the garden (i.e. HB Green Expo and Forum; Harvest Celebration; and Holiday Celebration, etc.)
<input type="checkbox"/>	Harvest Brigade Committee: Deliver donated produce to local food banks and charities.
<input type="checkbox"/>	Scouting Committee: Provide outreach to get Boy Scout and Girl Scout troops involved in the garden.
<input type="checkbox"/>	Volunteer Committee: Coordinate and grow the volunteer base for the garden.
<input type="checkbox"/>	Maintenance Project: Weeding common areas, planting, pruning and repair.

Do you have any physical limitations? _____

Do you have any special interests or skills? _____

In Case of Emergency Information

Name: _____ Telephone: _____

Are you 17 or younger? YES NO If yes, parental consent and signature is required. Parental Consent (to be completed if applicant is under 18 years of age) I give my consent for my child, named on this application, to provide volunteer services to HBCG. I also give HBCG my consent to obtain any emergency medical treatment necessary for the safety of my child.

Signature of Parent/Guardian _____

Printed Name of Parent/Guardian _____

Please read the attached rules and regulations of the garden. I understand that neither the Huntington Beach Community Garden nor the City of Huntington Beach, nor the HBCG Board of Directors is responsible for my actions. I therefore agree to hold harmless the Huntington Beach Community Garden, and the City of Huntington Beach, and the HBCG Board of Directors for any liability, damage loss or claim that occurs in connection with volunteering at the garden.

Signature: _____