

The purpose of the UNCGreensboro Gardens is to build healthy, interactive urban communities through the collective production of locally grown, organic food. UNCGreensboro Gardens recognizes the need for education and sustainability and draw on the varied expertise at the University and within the local community. *A minimum of 4 people* must be listed for plot use. The rental rate for a single 4 X 8 plot is \$10 per semester (fall, spring or summer) up to \$30 a year. Fees will be used for maintenance and operations.

**Contact Person**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Campus Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

How are you affiliated with UNCG? (check all that apply)

 Faculty                       Staff                       Current Student                       Alumni
**Plot Request**

Are you applying as a(n):

 Group                       Class

What is your Department/Major/Campus Organization?

\_\_\_\_\_

If for a class, what is the Course Prefix and Number?

\_\_\_\_\_

If for a class, please describe your course-related plans for a plot in the UNCGreensboro Gardens.

\_\_\_\_\_

For all applicants, provide a brief timeline for your plot (e.g., planting, harvesting, reporting, etc.). Please include your plans for the plot following graduation.

\_\_\_\_\_

For all applicants, how will you bring together faculty, staff, students, and/or alumni to work on your plot?

\_\_\_\_\_

\*For non class-related plot requests, please list the names and email addresses of 3 additional members of your group:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For all applicants, what experience do you (or other members of your group) have in maintaining a garden? (Note: previous experience is not a requirement; the committee would like to know how we can help out new gardeners).

\_\_\_\_\_

Would you like educational support in developing your plot?

 Yes                       No

Would you be willing to work with other faculty, staff, students, and alumni on a single plot?

 Yes                       No
**Additional Questions, Comments, or Special Needs:** \_\_\_\_\_Send all application materials to Susan Andreatta in the Department of Anthropology at [s\\_andrea@uncg.edu](mailto:s_andrea@uncg.edu)

## **GUIDELINES FOR PLOT DISTRIBUTION**

The purpose of the UNCGreensboro Gardens is to build healthy, interactive urban communities through the collective production of locally grown, organic food. Members of the garden recognize the need for education and sustainability and draw on the varied expertise at the University and within the local community.

### **Contact Information**

All inquiries may be directed to the co-chairs of the UNCGreensboro Gardens committee:

Susan Andreatta

Phone: 256-1164

Email: s\_andrea@uncg.edu

Guy Sanders

Phone: 334-4222

Email: gmsander@uncg.edu

### **Plot Distribution Rules**

The UNCGreensboro Gardens will consist of approximately 30 plots, measuring 4 feet X 8 feet. Plots may be rented by Current Faculty, Staff, and Enrolled Students of the University of North Carolina at Greensboro. Fees will be used for maintenance and operations. Plots will be distributed based on the following rules:

1. Plots will be available to rent during the Fall, Spring and Summer semesters.
2. The rental rate for a single 4 X 8 plot is \$10 per semester. Fees will be used for maintenance and operations.
3. Applications for plots will be submitted using an online application form <http://sustain.uncg.edu/>
4. Plot requests must be submitted to the UNCGreensboro Gardens committee no later than
  - Fall growing season starts two weeks after the Fall semester commences
  - Spring growing season commences after the December Commencement.
  - Summer growing season starts one week after Spring Commencement
5. The UNCGreensboro Gardens committee will appoint a sub-committee to review the garden applications.
6. Priority will be given to UNCG courses and academic projects, formally-organized student groups, and collaborative and team projects with a minimum of four people including UNCG faculty, staff, and students.
7. The sub-committee is responsible for notifying applicants regarding the status of their plot request within 14 days of the close of applications.

## GUIDELINES FOR PLOT PARTICIPATION

The purpose of the UNCGreensboro Gardens is to build healthy, interactive urban communities through the collective production of locally grown, organic food. Members of the garden recognize the need for education and sustainability and draw on the varied expertise at the University and within the local community.

### Contact Information

Application materials may be found online at <http://sustain.uncg.edu/>

Additional inquiries may be directed to the co-chairs of the UNCGreensboro Gardens committee:

Susan Andreatta

Phone: 256-1164

Email [s\\_andrea@uncg.edu](mailto:s_andrea@uncg.edu)

Guy Sanders

Phone: 334-4222

Email: [gmsander@uncg.edu](mailto:gmsander@uncg.edu)

### Plot Participation Rules

The UNCGreensboro Gardens consists of approximately 50 plots, measuring 4 feet X 8 feet. Plots may be rented by Current Faculty, Staff, Enrolled Students, and Alumni of the University of North Carolina at Greensboro. Individuals and groups may participate in the gardens based on the following rules:

1. The UNCGreensboro Gardens are housed on University property; therefore all activity in the gardens are subject to UNCG rules and procedures. The garden will be open from dawn until dusk, seven days a week.
2. Plot holders are responsible for their plots for the entire semester. Each semester begins on the first day of classes for that term and continues until the day before classes start for the following term.
3. Plot holders agree to participate in the UNCGreensboro Gardens at their own risk. The University of North Carolina at Greensboro cannot be held responsible for any injury or illness incurred while working in the gardens. Each participant must sign an official UNCG liability waiver.
4. Each set of plot holders is responsible for providing daily care of their plot. Plot holders are responsible for providing their own materials, seeds, and tools.
5. Benches and wheelbarrow storage tables may be used by all plot holders. No one group is assigned a storage bench or wheelbarrow container. Please use these materials respectfully. UNCGG is not responsible for tools or other valuables stored in the containers.
6. The common area between the raised beds needs to be maintained by all participants. Plot holders are required to weed around their immediate bed space (all four sides).
7. Plot holders may grow only legal, non-poisonous, and non-aggressive plants.
8. The garden supports organic and sustainable practices. Only organic fertilizers may be used. Pesticides and herbicides are prohibited. If you have questions about what soil amendments are permitted, please contact a UNCGreensboro Gardens committee member at:  
[http://www.uncg.edu/aas/uncg\\_gardens/committee.html](http://www.uncg.edu/aas/uncg_gardens/committee.html).
9. Water will be available from the University's water supply. Plot holders should be mindful of how much water they consume. Watering cans are the preferred method of irrigation. Individual drip or sprinkling systems are not allowed. If you decide to drag the hose to your plot, please remember to turn off the

nozzle while you cross the field. And, remember to turn off the water when you return the hose to its resting place.

10. Plot holders are expected to keep the walkways and paths surround their plots free of debris, sprawling plants and weeds. All weeds and plant materials may be disposed of in designated composting areas.
11. Family and friends are welcome, and plot holders are responsible for the behavior of their guests. Anyone working in the garden must have a signed waiver form housed in the facilities office.
12. Only service animals are permitted inside the garden gates. Plot holders are expected to notify the UNCGreensboro Gardens committee if they are no longer able to care for their plot.
13. Plot holders are expected to notify the UNCGreensboro Gardens committee if any theft, vandalism, or conflict has occurred.
14. At the end of each term (Fall, Spring, or Summer), plot holders are expected to submit a report that includes a bed diagram, description of growing methods, what was harvested from their plot,.
15. Plot holders reserve the right to determine how their crops are divided among the plots members. This includes donations and withholding crops from inactive members.
16. If plot holders fail to comply with any of the above-mentioned rules for participation, they will be contacted by the UNCGreensboro Gardens committee and given the opportunity to correct their practices. If plot holders do not comply with this request within 14 days, those plot holders will lose garden privileges for the remainder of the semester. If an individual or group has a delinquent plot for two consecutive semesters, the UNCGreensboro Gardens reserves the right to decline future plot requests.

For additional information regarding membership in the UNCGreensboro Gardens campus organization, please refer to the UNCGreensboro Gardens Constitution.

### **Commitment**

I will work to make the UNCGreensboro Gardens a successful and sustainable project that serves the educational, social, and health needs of the UNCG community. I will work with my fellow plot holders to ensure a safe and secure place for our garden to grow.

I have read and understand all of the rules and regulations for the UNCGreensboro Gardens, and I agree to follow them.

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Signature of plot holder

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Date

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Signature of UNCGreensboro Gardens committee member

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Date

# UNCG GARDENS PROGRAM

## Release and Hold Harmless Agreement and Consent for Medical Treatment

In consideration of my/my child's participation in the UNCG Gardens program on land owned by UNCG at 123 McIver Street (the "Program"), I hereby release, hold harmless, and forever discharge The University of North Carolina at Greensboro, the Board of Governors of the University of North Carolina and the State of North Carolina (collectively referred to as the "University"), and its employees and agents from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, property damage, or personal injury, including death, that may be sustained by me/my child or to any property belonging to me/my child while participating in the Program, including any loss, property damage, or personal injury, including death, that may be sustained by me/my child or to any property belonging to me/my child caused by the negligence of the University, its agents or employees.

I am fully aware of the risks and hazards associated with this Program. I acknowledge that my/my child's participation in the Program is elected by me and not required. These risks include, but are not limited to, falls, cuts, breaks, bites, allergic reactions, strains and **death** associated therewith. I voluntarily assume full responsibility for any risk of loss, damage, or personal injury, including death, and for any property damage that may be sustained by me/my child as a result my/my child's participation in this Program.

In the event of illness or injury, I hereby authorize employees or agents of the University to obtain emergency medical treatment for me/my child at any local hospital as deemed necessary, including administration of an anesthetic or other medication and surgery, and I hereby assume the cost of such treatment. I understand that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of the University to give specific consent to the diagnosis, treatment, or hospital care which in the best judgment of a licensed physician is deemed advisable. I understand that the University will make best efforts to notify me immediately should emergency treatment for my child become necessary. I also grant permission for emergency CPR to be administered to me by a certified person should it become necessary.

I have read and I understand this document. I understand and agree that it is binding on me/my child, my heirs, assigns, and personal representatives.

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Signature of Participant

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Date

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Printed Name, Address and Telephone number of Participant

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Signature of Parent or Guardian (required if Participant is under 18)

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Date

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Printed Name, Address and Telephone number of Parent or Guardian (required if Participant is under 18)

(Original signed Release to be provided to UNCG Associate Vice Chancellor for Facilities and kept on file for 10 years)