Community Garden Address: 437 SW 144th Street, Burien, WA 98166 **Email:** parksinfo@burienwa.gov
Community Center Business Hours: Monday-Thursday: 9 AM – 7 PM, Friday: 9 AM – 5 PM **Phone:** (206) 988-3700

City of Burien Community Garden Application

Thank you for your interest in the City of Burien Community Garden! The Community Garden is open to Burien residents who are at least 18 years old and can be used for recreational/personal use to grow produce and/or flowers.

All plots are 75 square feet (6'x 12.5') and cost $35/year. Each resident household may rent one (1) plot, with priority given to returning gardeners. Plots can be rented for one (1) year beginning April 1 of the current year and ending on March 31 of the following year (April 1-March 31).

- *Summer season:* April 1-October 31
- *Winter season:* November 1-March 31

All Gardeners must complete eight (8) hours of volunteer service annually to the community garden common areas. Service hours must be reported by contacting the Community Center.

Primary Gardener Information

Are you a returning gardener? ☐ Yes ☐ No If yes, previous plot(s) number: _____

Full Name: _____ Email: _____

Phone Number: _____

I prefer to be contacted by: ☐ Email ☐ Phone ☐ Both

Street Address: _____

City, State, Zip Code: _____

Languages Spoken: ☐ English ☐ Spanish ☐ Vietnamese

☐ Somali ☐ Mandarin Chinese ☐ Arabic

☐ Other, please specify: _____

If possible, I would like a plot near (list full name): _____

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People 55+ years and/or people that experience physical limitations may possibly be assigned to a raised plot. Please select all that apply:

☐ I am 55+ years old and would like a raised plot, if possible

☐ I experience physical limitations and would like a raised plot, if possible

☐ Does not apply to me

How did you hear about the Community Garden program?

_____

_____

_____

Secondary Contact Information

If you plan to have another person from our household garden with you at your plot, please list their information below.

Full Name: _____ Email: _____

Phone Number: _____

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Program Waiver Information

Equal Access. The City of Burien does not discriminate against or exclude anyone from participating in any programs or services on the basis of race, color, national origin, age, sex, religion, sexual orientation or handicap. I understand that if an accommodation is needed that such requests must be submitted at least ten working days before the activity begins.

Cancellations or Schedule Changes. This class schedule is for information purposes only. Burien Parks, Recreation and Cultural Services reserves the right to make any changes in the content and provision of the class schedule without notice.

Emergency Medical Treatment. I consent to my child's or children's participation in the activity/program of the Burien Parks, Recreation and Cultural Services, and authorize the City and its employees or agents to provide emergency treatment for my child or children on my behalf if I cannot be reached I understand I am responsible for any related medical costs and release the City of Burien and its representatives from liability for acting in good faith under this authorization.

Photo/Video Release. I give permission for myself and my child(ren) to be photographed or recorded during the City of Burien Parks, Recreation and Cultural Services Programs (including names, likenesses, and voices) for promotional or marketing purposes, without compensation. I expressly release the City of Burien and its agents from any and all claims, including but not limited to libel, invasion of privacy, misappropriation and any other claim arising from the use of these materials.

I am at least eighteen (18) years of age, legally competent and voluntarily registering to participate in a City of Burien-sponsored recreational activity. I understand that my participation involves inherent risks, including, but not limited to, serious personal injury, death or other harmful consequences which may occur directly or indirectly from my participation.
In consideration of being permitted to participate in city-sponsored activities and/or use city facilities, voluntarily assume all risks of injury or harm to myself. I further release, waive, and hold harmless the City of Burien, its officials, employees, and agents from any and all claims, demands, or causes of action, that I, my heirs, executors, or assigns may have for any injury, death, or other loss resulting from my participation.

Signature _____ Date: _____

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Demographic Information (Optional)

How would you describe your race?

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or other Pacific Islander ☐ White/Caucasian ☐ Prefer not to disclose

Are you of Hispanic or Latino/a origin? ☐ Yes ☐ No ☐ Prefer not to disclose

How would you describe your gender?

☐ Female ☐ Male ☐ Gender non-conforming ☐ Other:_____ ☐ Prefer not to disclose

Do you consider yourself a part of the LGBTQIA+ community?

☐ Yes ☐ No ☐ Prefer not to disclose

What is the highest level of education you have completed?

☐ Less than high school ☐ High school diploma or equivalent (GED) ☐ Some college, no degree

☐ Associate degree ☐ Bachelor's degree ☐ Graduate or professional degree

☐ Prefer not to disclose

Which of the following best describes your current employment status?

☐ Employed full-time ☐ Employed part-time ☐ Self-employed ☐ Not employed ☐ Retired

☐ Disabled, not able to work ☐ Prefer not to disclose

What was your combined household income in the last year?

☐ $0-$9,999 ☐ $10,000-$19,999 ☐ $20,000-$29,999 ☐ $30,000-$39,999

☐ $40,000-$49,999 ☐ $50,000-$59,999 ☐ $60,000-$69,999 ☐ $70,000-$79,9999

☐ $80,000-$89,999 ☐ $90,000-$99,999 ☐ $100,000 or more ☐ Prefer not to disclose

Which of the following best describes your current living situations?

☐ Own my living space ☐ Rent my living space ☐ Other: _____ ☐ Prefer not to disclose

What is your age?

☐ 18-24 ☐ 25-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65 and older ☐ Prefer not to disclose