



PARKS, RECREATION AND CULTURAL ARTS DEPARTMENT

SPECIAL EVENTS DIVISION

3801 PINE ISLAND RD. • DAVIE, FLORIDA 33328

PHONE: 954.797.1181 • FAX: 954.797.1148 • WWW.DAVIE-FL.GOV

Community Gardens Gardener Registration Form

Name: _____ Age: _____

Address: _____

Phone: _____ Cell Phone: _____

E-mail: _____

Emergency Contact: _____ Phone: _____

- Fee (Davie Residents only): \$30 per year/per plot (August 1st – July 31st)
Proof of Residency is required: utility bill dated within the past two months.
Please make check or money order out to Town of Davie and include with your application. Please note that payment is non-refundable.

I have received, read and agree to abide by the Community Gardens Participant Memorandum of Understanding and Hold Harmless Agreements, supplied separately.
Initials: _____

I would like to request garden plot number: _____

Mail or deliver:

- ___ Completed Gardener Registration Form
___ Signed Participant Memorandum of Understanding
___ Signed Hold Harmless Agreement
___ Check or Money Order made out to Town of Davie to:

**Town of Davie Parks, Recreation
& Cultural Arts Department
Special Events/Community Gardens
6591 Orange Drive
Davie, FL 33314**

For Office Use Only:

Type of Payment: _____ Date Received: _____

Plot Number: _____