

Volunteer Application Form

NP Garden Project

Name: _____

Email Address: _____

Phone #: _____

What areas of gardening/volunteering would you be able to help with: (please mark any that apply)

- Spring Preparation – turning soil, spreading compost ...
- Spring Vegetable Planting
- Watering
- Weeding/Thinning/Deadheading
- Harvesting
- Fall Cleanup
- Children's Program (Background Check Required)
- Pollinator Garden

Availability: (please mark all that apply)

- Flexible
- Daytime
- Evenings
- Weekdays
- Weekends

Please return form to front desk at library.

Contact jmc110950@comcast.net with any questions.