

NP Garden Project Volunteer Form

(No Experience Necessary)

Name: _____

Email Address: _____

Phone #: _____

What **areas** of gardening/volunteering would you be able to help with or would like to learn more about?

- Spring Preparation – turning soil, spreading compost **(April/May 2-3 days to complete)**
- Spring Vegetable Planting - seeds and seedlings **(April/May) 2-3 days to complete)**
- Watering 1 day per week in Memorial Garden
- Watering/Weeding/Thinning/Deadheading in vegetable garden – 2 volunteers assigned per day - **looking for 12 volunteers**
- Weeding/Thinning/Deadheading in pollinator garden – **as needed**
- Harvesting/Packaging produce for Food Pantry – **done on Wednesday and Thursday**
- Fall Cleanup – **in September – 2 to 3 days**
- Children’s Program (Background Check Required)- **1 day a week for 8 weeks (2 volunteers needed per session)**

Availability: (please circle all that apply)

Flexible

Daytime

Evenings

Weekdays

Weekends

Please return form to front desk at library. Librarian will place application in Garden Project box.

Email questions to judyandtomc@comcast.net or gracemielczarek@gmail.com