



RECREATION DEPARTMENT
Po Box 1026
Bluefield, VA 24605
276-322-4626 Fax: 276-322-1160

Community Garden Registration Form-Each Garden Is \$10

Name: _____

Address: _____

Telephone: _____

E-Mail: _____

Space #: _____

Waiver:

I (we) hereby relieve the Town of Bluefield, Virginia, it's agents and employees, from any and all liability for any damage loss, injury or costs associated with or arising from the Applicant's use and presence at the Town of Bluefield, Virginia Community Garden; and furthermore, I (we) agree to indemnify and hold the Town of Bluefield, Virginia harmless from all claims, costs and actions occasioned by me for the use and presence at the Town of Bluefield Community Garden

I (we) have read and understand all the regulations of the Town of Bluefield Farmers Market and agree to comply with these rules accordingly.

Applicant

Date