

YORK TOWNSHIP COMMUNITY GARDEN APPLICATION

2026 Season: May 1—October 31

2025 Returning Gardeners have until March 31 to confirm a plot. Plots will be available to the public beginning April 1.

NAME: _____

STREET ADDRESS: _____

CITY: _____ ZIP: _____

HOME/CELL PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____

PLOT PAYMENTS DUE WITH SUBMISSION OF APPLICATION—\$15.00

OTHERS AUTHORIZED TO WORK MY GARDEN:

York Township has issued Community Gardens Guidelines and Rules for Use. Please read these guidelines and rules and then sign the statement below:

I agree to follow the Community Gardens Guidelines and Rules for Use established by York Township, as well as all regular park rules. I understand that failure to follow these guidelines and rules may result in the loss of gardening privileges.

(This application is not valid unless signed below.)

Signature (Sign, then print name as well) Date

*****OFFICE USE ONLY*****

Date/Time Received: _____

Date Contacted Regarding Plot: _____

Number of Plots: _____ Charge for the Plot(s): _____

Payment Received: Date— _____ Amount— _____

Additional Comments: _____
