



## ST. THOMAS COMMUNITY GARDEN REGISTRATION FORM

Completed form and suggested donation can be taken or sent to St. Thomas Lutheran Church, 3800 E. Third St., Bloomington, IN 47408.  
Questions? Call 812 332-5252.

PLEASE PRINT LEGIBLY

Primary Gardener Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address (please include ZIP): \_\_\_\_\_

St. Thomas Lutheran Church member/participant? (circle one) YES or NO

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

E-mail Address (primary contact): \_\_\_\_\_

The e-mail address you list above will be used as our primary method of contacting you. Please notify St. Thomas Lutheran Church immediately if you change your e-mail address or lose e-mail access. If you would prefer another method of communication for primary contact, please check below.

\_\_\_\_\_ I do not use e-mail. Please use phone number and address listed above to contact me.

Emergency Contact Name: \_\_\_\_\_ Relation to Primary Gardener: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Number of 4-foot x 8-foot beds requested: \_\_\_\_\_

Suggested donation per bed: \$10 for St. Thomas Lutheran Church members \$20 for non-members

Additional donation: \$ \_\_\_\_\_ [Make checks payable to: St. Thomas Lutheran Church Community Garden]

FOR OFFICE USE ONLY:

Date Rec'd: \_\_\_\_\_

Donation: \_\_\_\_\_

Bed #: \_\_\_\_\_