



## Lower St. Croix Valley Community Gardens

# 2024 APPLICATION FORM

Please submit this completed application to: **Afton City Hall**  
3033 St. Croix Trail, P.O. Box 219, Afton, MN 55001  
Or email it to: [officeasst@ci.afton.mn.us](mailto:officeasst@ci.afton.mn.us)

RESIDENT NAME: \_\_\_\_\_

ORGANIZATION (IF APPLICABLE): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NUMBERS: home: \_\_\_\_\_ cell: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PLEASE SUMMARIZE YOUR GARDENING EXPERIENCE:

PLEASE TELL US BRIEFLY WHY YOU WANT A COMMUNITY GARDEN PLOT:

I have read the Guidelines and agree to abide by them if I am awarded a garden plot.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

### FOR OFFICE USE ONLY:

Staff received: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_