

2017 Bloomer Community Garden

Mayo Clinic Health System – Chippewa Valley in Bloomer and University of Wisconsin – Extension Chippewa County are offering community gardening in Bloomer for the 2017 growing season. 10' x 20' garden plots along Duncan Road are available for lease by individuals, households, or organizations. The gardens will be tilled and ready for planting by mid May. Fees for leasing plots are \$20.00 for Bloomer community residents and the staff of Mayo Clinic Health System – Chippewa Valley in Bloomer. Lease fees will go toward the Bloomer Community Food Pantry.

Guidelines and application for plot lease should be signed and returned with the lease fee to the address listed on the application form.

Community Garden Guidelines

I agree to abide by the following terms and conditions:

1. I will pay a yearly non-refundable fee to help cover garden expenses in the amount of \$20.00 (**checks payable to Bloomer Community Food Pantry**) which will be due at the start of the season.
2. Garden plots will be restricted to one plot per household per season. Requests for multiple plots may be made on the application form and plot holders will be notified if additional plots are available.
3. I will have something planted in my plot by the end of May and keep it planted all summer long.
4. I will keep weeds down and maintain the areas immediately surrounding my plot.
5. I will keep a regular maintenance schedule throughout the growing season and arrange for a neighboring gardener to care for my plot during my time away.
6. I will remain on-site while watering.
7. I will be contacted if my plot has been neglected or improperly cared for. If a solution cannot be found then the plot may have to be reassigned.
8. I will follow the guidelines of Integrated Pest Management, which is the practice of avoiding herbicides and pesticides in the garden whenever possible.

9. I will keep my plot and adjacent pathways and fences clear of trash, litter, and weeds. I will take all trash home for disposal or recycling. There will be no trash disposal available on-site
10. I will use the compost bin where available for depositing garden waste. I will not include plastics, any food waste other than fruits and vegetables, or any weeds that have seeds.
11. I will harvest my own crop only, unless given permission by other plot owners.
12. Children may be in their family garden plot only and must be supervised at all times.
13. I will not bring pets within the perimeter of the garden.
14. If I must abandon my plot for any reason, I will notify the garden coordinator.
15. I will participate in the fall clean up of the garden.
16. Smoking, drinking and/or improper behavior will result in termination of this agreement.

Mayo Clinic Health System – Chippewa Valley in permitting the use of certain excess lands for garden plots by the public, is not responsible for any personal injury or property damage incurred by any plot holder or their guests, or for the theft, loss, or destruction of personal property owned by any plot holder.

Questions about the Bloomer Community Garden may be directed to:

UW - Extension Chippewa County at 715-726-7950



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Guidelines Agreement Form



Name of Plot Holder: _____

Address: _____

Phone #: _____ Cell Number: _____

E-mail address: _____
(You will receive only BCG-related informational emails.)

New Gardeners and Returning Gardeners

I wish to rent a 10' x 20' garden plot on Duncan Road: _____

I wish to rent a second 10' x 20' plot on Duncan Road if one is available : _____

Returning Gardeners

I wish to retain the plot I gardened last season: _____ Plot number if known _____

I wish to rent a second plot if one becomes available : _____ (One plot is guaranteed to returning gardeners. Second if plots are still available after May 15)

I wish to rent a wheelchair accessible raised bed if available : _____

I agree to allow BCG to use any photo of myself for publicity purposes: _____
(please initial)

I agree to let my contact information be distributed to my fellow gardeners: _____
(please initial)

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I have read and agree to abide by the Bloomer Community Garden terms and conditions outlined in the Community Garden Guidelines.

Plotholder's signature: _____ Date: _____

Return application with plot rental fee of \$20.00 (Made payable to the Bloomer Area Food Pantry) to:
Bloomer Community Garden
c/o UW-Extension
Courthouse Room #13
711 N. Bridge St.
Chippewa Falls, WI 54729