

Master Gardener Association
PROJECT APPLICATION

Are you aware of any project in the community in which the services of Master Gardeners would be helpful?

1. Project Name/Project Description: _____

2. Physical Location of Project: _____

3. Person(s) in Charge:	<u>Name</u>	<u>Phone</u>	<u>E-Mail Address</u>	<u>Other</u>
	_____	_____	_____	_____
	_____	_____	_____	_____

Note: If this is a school project provide the name and address of the school location and the name of a staff member of the school, principal's name, etc., who will be responsible for the on site project.

4. Estimated Start/Finish Dates _____

5. Who will manage the ongoing maintenance of this project upon completion?

6. Who should the Master Gardener Association contact regarding this request?

Name	Phone	E-Mail or Mailing Address
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Please attach copies of your plan, project layout or other information that will be helpful in determining the feasibility of this project.

The Master Gardener Program and/or the Master Gardener Association of Yavapai County is the sole owner of any plan that it develops and/or provides for any said project. These plans will not become the property of the project owners or their hired contractors.

The Master Gardener Program and/or The Master Gardener Association is not responsible for the raising of funds or the management of funds for any specific project.

The Master Gardeners are educators, not a free source of labor for other agencies or community groups, per the Program Policy.

Please read the above information carefully, then sign and date this document.

Signature: _____ Date: _____

Note: A project will not be accepted until all of the above information is provided.