



GARDEN STARTERS 2019 KIT & SERVICE APPLICATION

TODAY'S DATE: _____

The **GARDEN STARTERS PROGRAM** is part of *Edible Flint's* strategy to increase Flint's capacity to produce healthy food. Through knowledge sharing, training, technical assistance and garden resources, this group aims to support food gardens in our city

The **GARDEN STARTERS KITS** includes 100% organic seeds (8 kinds and 8 varieties of transplants) retail **\$72**. A maximum of two kits may be ordered per garden and/or group. **WHILE SUPPLIES LAST!**

The **GARDEN STARTERS SERVICES** are available to gardens in the **City of Flint ONLY!** In order to continue to provide these services, *Edible Flint* requests the cost listed below for the Kit & Services items.

NEW FOR 2019 the *Edible Flint* "Pop-Up Garden Market" - limited varieties of seeds and transplants available for purchase - **first come basis**.

➔ **GARDEN STARTERS KIT & SERVICES** (please complete chart) **Services available WHILE SUPPLIES LAST!**

ITEM REQUESTED	COST	QUANTITY	TOTAL (multiply quantity x cost)
GARDEN HOSE FILTERS 1 per application. Flint Gardens: Call (810)244-8547 for information on how to order additional hose filters	\$10.00		
SOIL TESTING* Any garden in the City of Flint Max 2 gardens (up to 1,000 sq. ft. = 1 garden)	\$10.00		
		AMOUNT DUE:	(add up totals)

KIT DISTRIBUTION DAY - WEDNESDAY, MAY 15, 2019 - 2:00 -7:00 PM
Neighborhood Engagement Hub 3216 ML King Ave, Flint, MI 48505

Accessible tools, tiller rentals and for-hire contacts available — **call The Neighborhood Engagement Hub 810-620-1299**

***Disclaimer Statement:** Soil test data may be used to support *edible flint's* work —no personal information will be shared.

DON'T STOP NOW! Please complete both sides of this form ➔

GARDEN INFORMATION (Please answer all questions)

PRIMARY CONTACT (first & last name): _____

NAME OF GARDEN AND/OR ORGANIZATION: _____

MAILING ADDRESS: _____

CITY: _____ ZIP CODE: _____

DAYTIME PHONE NUMBER: _____ CELL PHONE: _____

EMAIL: _____

YOUR PREFERRED METHOD OF CONTACT: EMAIL _____ TEXT MESSAGE _____ PHONE _____ MAIL _____

ALTERNATE CONTACT PERSON (first & last name): _____

PHONE: _____ EMAIL: _____

Please list your garden (s) location (parcel numbers must include street name):

1) _____ Zip Code _____

2) _____ Zip Code _____

Square feet for lot 1 : _____ ft x _____ ft Square feet for lot 2: _____ ft x _____ ft

Years in cultivation, not including this year (please circle): 1 2 3 _____ New garden

Number of adults involved: _____ Number of youth (under 18) involved: _____

Has the soil been tested? _____ Yes _____ No If yes what year? _____

Do you have a water source? _____ Yes _____ No If yes, please describe the water source: _____

What do you grow in your garden? Check all that apply

_____ Vegetables _____ Herbs _____ Fruit _____ Flowers _____ Other _____

Are you willing to track your harvest? _____ Yes _____ No

I would like to learn more about **edible flint**:

_____ Classes _____ Garden Tour _____ Nutrition _____ Services _____ Volunteer

Are you interested in learning more about selling your produce? _____ Yes _____ No

PLEASE SUBMIT COMPLETED FORM NO LATER THAN July 10, 2019

Note: Kits must be picked up by end of Distribution Day. You will receive an automated reminder call on Monday, May 13, 2019.

MAIL Edible Flint Garden Starters
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Flint, MI 48502

FAX 810.341.1729

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Cash, checks or money orders are payable to **edible flint** or order online at edibleflint.org



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