



## Community Garden Development Training 2011-12 Participant Registration Form

To help us provide the best Community Garden Development Training (CGDT) possible, please provide us with the following information as it applies to you.

1. Name: \_\_\_\_\_ Date: \_\_\_\_\_

2. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

3. Neighborhood: \_\_\_\_\_

4. Phone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Email \_\_\_\_\_

5. Please describe your knowledge of and experience with community gardening:

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6. Why are you taking the CGDT training series?

To develop a community vegetable garden \_\_\_\_\_

To develop a community beautification garden \_\_\_\_\_

To learn more about gardening \_\_\_\_\_

To become involved with a garden group \_\_\_\_\_

To volunteer with a community garden \_\_\_\_\_ Other \_\_\_\_\_

7. Please list what you hope to gain from the CGDT garden development series:

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8. Neighborhood of prospective or current site: \_\_\_\_\_

Address (if known): \_\_\_\_\_

9. Community Garden Focus: Vegetable \_\_\_\_\_ Beautification \_\_\_\_\_ Combination \_\_\_\_\_

Over please...

10. What is the purpose of your current or prospective community garden? Beautification \_\_\_\_\_  
food for gardeners \_\_\_\_\_ food for others \_\_\_\_\_  
recreation \_\_\_\_\_ education \_\_\_\_\_ community pride \_\_\_\_\_  
reduce crime \_\_\_\_\_ fellowship \_\_\_\_\_ other \_\_\_\_\_

11. Are there other garden members attending \_\_\_\_\_  
If yes, please list other participants

\_\_\_\_\_  
\_\_\_\_\_

12. Who is the primary contact person for your garden project? \_\_\_\_\_

13. Years of gardening experience: \_\_\_\_\_

Experienced in: Vegetable and/or herb gardening \_\_\_\_\_

Annual and perennial gardening \_\_\_\_\_

Commercial vegetable/ fruit production \_\_\_\_\_

Other \_\_\_\_\_

Please circle the most appropriate answer:

1. Overall, how would you rate your gardening knowledge?  
(5 being most knowledgeable)

1                      2                      3                      4                      5

2. Does your community support grassroots community projects?  
(1 = Never, 5 = Always)

1                      2                      3                      4                      5

3. Please rate your overall confidence in developing a sustainable community garden.  
(1 = Not confident, 5 = Very confident)

1                      2                      3                      4                      5

How did you hear about the CGDT training series?

Urban Gardener Newsletter \_\_\_\_\_ Gardener's Bulletin \_\_\_\_\_ Newspaper \_\_\_\_\_ Friend \_\_\_\_\_

Mailing \_\_\_\_\_ Other \_\_\_\_\_

*Thank You!*