TNG Information for New Members (2015)

Are you interested in joining the Taroona Neighbourhood Garden, either as a plot holder or as an Associate member?

The 2015 Membership Fee is $60 per year ($25 concession for Low Income Health Care card holders) and the fee covers bed construction, tools, training and public liability insurance. Associate membership is $10 and is for people who are supporters of the garden but who do not wish to have a plot. It allows allows access to the garden, social events and workshops and to buy excess produce.

If you would like to join, please make an enquiry to the TNG email address first, as we often have a waiting list and may not have a plot available immediately. You may wish to join as an associate member (no plot) as an alternative form of participating.

Once you have been accepted, complete the form below, and email it as an attachment to: ***tng@taroona.tas.au***

Alternatively, fill in a printed form and post or deliver to TNG Treasurer, 24 Seaview Ave, Taroona 7053.

Membership has some obligations, so before you apply make sure you are able to:

* regularly manage and maintain your own plot, keeping it productively planted, free from weeds and pests, and harvesting produce when it is ready.
* attend working bees or otherwise contribute to the general upkeep of the communal areas of the garden: a minimum of approximately 5 hours of your time is expected
* **Contributing to the garden:** There are many ways to get together with other members and help to make our garden grow beautifully. Coming to busy bees is not the only way.......

*If you can’t come to busy bees, you could make an offer on one of the following*

*1. Take big load of fruit tree prunings to the tip at end of February, or March*

*2. Contribute 2 hours of plumbing expertise to the watering system works
3. Use TNG mower to mow the grass (by joining the mowing roster: mow 2-3 times a year)*

*4. Use TNG brush cutter to trim edges (by joining the trimming roster: trim 2-3 times a year)*

*5. By joining the compost crew (various jobs at various intervals).*

And read our latest News to Members at the web link:
 <http://taroona.tas.au/neighbourhood-garden/member-news-2015>

**Now, please fill in an Application Form for membership of the** **Taroona Neighbourhood Garden – Next Page.**

**Taroona Neighbourhood Garden - Application Form 2015**

Use this form to apply for membership of the TNG. Membership covers bed construction, tools, training and public liability insurance. Associate membership allows access to the garden, social events and workshops and to buy excess produce. Note: As we usually have a waiting list, we can supply only one garden plot per household, and give preference to Taroona residents.

Complete the form online and email it as an attachment to: ***tng@taroona.tas.au***

Alternatively, fill in a printed form and post or deliver to
*TNG Treasurer, 24 Seaview Av, Taroona, 7053.*
Before you apply make sure you satisfy the following criteria (tick each or highlight if submitting electronic copy))

O I can contribute an annual fee of $ 60.00 (Concession $25 for Low Income Health Care card holders) or for Associate membership: no bed ($10) (concession of $4 for Low Income Health Care card holders.)

O I am able to attend at least **three two-hour working bees** per year

O I can contribute to the communal upkeep of the gardens (e.g. via working bees)

O I’m prepared to regularly manage and maintain my plot.

Given Name/s............................................... Family Name/s....................................................

Address.......................................................................................................................................

..............................................................................................……….Postcode..............................

Telephone numbers: home ............................................................. works.................................

Mobile ........................................... email..................................................................................

Emergency contact ......................................Relationship.......................... Tel..............................

Low Income health care card holder (eligibility for concession?)$ ☐$?

Full membership $☐$ ($60/ $25 conc) $☐$ Associate membership ($10/$4.00 conc)

Do you have any special physical needs for your garden plot? $☐$Yes ☐ No
Please indicate your skills and interests that could contribute to the needs of the community garden.**.................................................................................................................................**

Availability for working bees
☐ morning ☐ afternoon ☐ evening ☐Monday - Friday ☐ Saturday ☐ Sunday

Comments?

Signature ............................................................................ Date.......................................................