Family Garden Program

The Dodge Nature Center Family Garden Program is an opportunity for community members to learn and implement organic gardening techniques. The Dodge Nature Center farm will provide the 15' x 15' plots, use of tools, soil amendments and pest control methods. The garden will be open to gardeners at their convenience throughout the gardening season until closing on **October 14th**.

There will be a second option in our garden. Some of the plots will be raised-bed plots. These 15' x 15' plots will be divided into three-3' x 15' beds, raised 16" off the ground, with a 3' path between them.
These plots will make it more accessible to those who have difficulty gardening at ground level. If you want this option, please say so on your registration. This is not guaranteed, but will be distributed on a first come basis.

Gardener's Orientation Session
Thursday, **April 19, 2012** at **6:30 p.m.** in the Farm Education Building.

Learn Organic Gardening Practices
Tuesday, **April 24** and Thursday, **April 26, 2012**, at **6 p.m.** in the Farm Education Building.

There is a limit of two plots per family. Registration will close when plots are full. Plots are assigned on a first come first served.

If you do not attend a meeting or contact Don by **May 31st 2011** that you are actively using your plot, your plot will be forfeited and no refund will be given.

If you have any questions, please contact Don at 651.455.4531.

Family Garden Registration Form

Gardener Information

Name:_____

Addrees:_____

City:_____ State:_____ Zip:_____

Daytime Phone:_____ Evening Phone:_____

E-mail:_____

Receive e-mail tips, gardening advice and reminders.

How did you learn about our garden program?_____

Indicate whether you want a raised-bed garden _____

Payment Information

Garden Program (per plot) Non-member $115
Member $85

☐ I am currently a Dodge Nature Center Member
☐ I am adding $40 (individual) or $60 (family) membership fee to receive the member rate. (Circle which you prefer.)
☐ Non-member

Payment Method

☐ Check Enclosed Amount $_____

☐ Credit Card: ☐ Visa ☐ MasterCard Amount $_____

Card Number_____ 3 Digits (On Back)_____
Exp. Date_____ Signature_____

Office Use Only: Rec'd ____ B ____ RE____ P ____ L ____

Please mail or fax form and payment to:
Dodge Nature Center, 365 W Marie Ave, West St Paul, MN 55118
Fax: 651.455.2575

FAMILY GARDEN

2012