CHILDREN’S VEGETABLE GARDEN PROGRAM

PARTICIPANT APPLICATION

Spring 2012

FOR WHOM: Children 8-13 in age

WHEN: February 18 thru June 2 for 16 Consecutive Saturdays

TIME: 9:00 A.M. TO NOON (UNLESS TOLD OTHERWISE)

ABOUT THE PROGRAM:

Texas AgriLife Extension Service provides an opportunity for children 8-13 in age to learn about gardening by growing their own vegetables through the mentoring of Bexar County Master Gardener volunteers. Each child is allotted a 3.5’x 28’ plot at the beautiful San Antonio Botanical Garden. Children will have fun growing different types of seeds, herbs, vegetables, and ornamental annual flowers. Weekly educational gardening presentations will stimulate these young minds. The children will also participate in fun, hands-on Junior Master Gardener activities.

In order to gain the most from the learning experience and to help ensure successful growing, participants are required to attend all sessions (two absences are allowed). Families are welcome to share the gardening experience with their child(ren); however, parents should remember that this is the child’s plot and learning experience.

HOW TO APPLY:

Legibly complete the attached application and submit it to the San Antonio Botanical Garden no later than Thursday, February 9, 2012. Space is limited, so apply early. The submission of an application does not necessarily confirm acceptance into the program. Acceptance in the program will be based on completeness of the application and willingness to attend each Saturday morning session (two absences are allowed). Participants accepted into the program will be notified by Monday, February 13.

After notification of acceptance into the program, a non-refundable program fee of $40 per plot which is used for the purchase of seeds, plants, compost, fertilizer, mulch, and other material must be paid on February 18, the first day of registration/orientation. Make checks payable to the San Antonio Botanical Society.

Note: If an individual plot is doubled up with a family member or friend, the plot fee will be $50.

Mail or drop off completed application to the,

Children’s Vegetable Garden Program
San Antonio Botanical Garden
555 Funston • San Antonio, TX 78209

The San Antonio Botanical Garden is a division of the City of San Antonio Parks and Recreation Department.

For more information or any special child requirements, contact the Program Coordinator David Rodriguez with Texas AgriLife Extension Service at dhrodriguez@ag.tamu.edu
Application Spring 2012
(Please print legibly)

Applicant’s Full Name: _____________________________________________
Age: _______ Grade: _______ (circle) Boy or Girl

Parent/Guardian: ___________________________________________________

Address: __________________________________________________________

Phone and e-mail address: ____________________________________________
Telephone Number: __________________________ E-mail Address:

Have you attended the program before, if so, when? _______________________

Do other siblings want to tend a separate plot this season? _____ Yes _____ No
If yes, what are their names? Remember, they have to fill out a separate application.

(This section shows the importance of commitment to this gardening program)

Will applicant be able to attend the Children’s Vegetable Garden Program every Saturday, February 18 through June 2, 9:00 am till noon (only two absences are allowed)? (Circle) Yes or No

Will child or a family member be able to attend the first four weeks of planting (very important)? (Circle) Yes or No

Will a parent or guardian be in attendance with their child, each and every Saturday? (Circle) Yes or No

Will child and family be able to attend the Saturday, May 19 Vegetable Show, Picnic and Recognition Ceremony which ends around 1 pm? (Circle) Yes or No

Will child and family participate on cleanup day Saturday, June 2; for their plot and the garden? (Circle) Yes or No

Will child be on time every Saturday by 9 am (unless told otherwise); do their daily chores; and stay for the daily presentation, as well as, participate in the daily JMG activity? (Circle) Yes or No

(This section must be completed by child, not parent)

Why do you want to participate in the Children’s Vegetable Garden Program?
____________________________________________________________________
____________________________________________________________________

Child’s commitment to the program signature: _______________________________

Parent’s/Guardian commitment to the program signature:
____________________________________________________________________

Monetary donations for further support and growth of the program are always encouraged and accepted. I wish to donate an extra $____________________.