

The Floyd Bennett Gardens Association Inc.
PO Box 340986 Ryder Retail Station, Brooklyn NY 11234

Ekaterina Kashkin, President • John Burrafato, Vice-President
Anne Gaudet, Recording Secretary • Judy Tropeano, Treasurer • Christine Morales, Corresponding Secretary

Children's Garden Membership Application

Please Print all requested information clearly

| | | | |
|----------------------|----------------|-------|----------|
| Parent/Guardian Name | | | Plot# |
| Address | City | State | Zip Code |
| Name of Child | Age | Grade | |
| Tel.: Home | Cell | | |
| e-mail | Childs School: | | |

Emergency Contact Information

Name: _____ Tel. _____

Relation to Child _____

Please indicate any special needs and/or allergy information

Parent/Guardian Child Agreement

I give my child permission to participate in the FBGA Children's Garden Program. I agree to be present at the time my child attends and participates in the workshops.

Print Name of Parent or Guardian _____

Signature _____

I am willing to attend and participate in the garden programs in the Children's Garden. I will cooperate with my instructor and fellow gardeners. I will be respectful and kind to my fellow gardeners, and all the critters that may live in the garden and soil. I will follow all rules while I participate in the garden.

Signature of Child _____

Date _____