

Elmsbook Grow Bed Agreement

Lovage View Site A / B (please circle)	Grow Bed plot number		Date
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The above Grow Bed will be available for use free of charge for the first year. A review will be carried out towards the end of the first year and a charge to cover costs of water supply, lighting, repairs etc may be made from 2020. You will be advised at least a month in advance of any changes we intend to make.

Declaration

Please tick

I/We confirm that I/we have read and agree to keep to the Grow Bed Ground Rules.

I/We understand that if I/we fail to keep to the Ground Rules, I/we will be asked to surrender my/our Grow Bed so that it can be allocated to someone else.

I/We understand that the Grow Bed is available free of charge for the first year however this may change following a review.

	Applicant 1	Applicant 2
Name:		
Address:		
Postcode:		
Home Tel no:		
Mobile no:		
Email address:		
Are you under the age of 18?		
Signed		
Date		

If you are under 18 years of age, your responsible adult who is supporting your application needs to complete the information and sign below. I confirm that I will support the above named in maintaining their Grow bed and ensure that the Ground Rules are kept at all times.

Name.....

Address.....

Mobile no.....Home no.....

Email

Signed.....**(Responsible adult)** **Date**.....