**St. Vincent Mission/Grow Appalachia Participant Commitment 2023**

This is a commitment between the St. Vincent Mission Grow Appalachia project and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­.

This commitment will serve as a formal agreement between both parties.

**The Grow Appalachia Project agrees to:**

1. Provide the coordinator to work with participants.
2. Provide seeds, plants, soil amendments and garden tools for participants.
3. Provide technical advice during the growing season.
4. Provide tilling services for participants.
5. Visit garden site during the growing season.
6. Host or co-host gardening workshops dealing with food prep, preservation, agricultural related issues, etc..
7. Host four all participant meetings where participants can discuss the progress and direction of the project.

**The participant agrees to:**

1. Schedule garden visit(s) with the Project Coordinator during the growing season.
2. Provide updates to the Project Coordinator on how the garden is growing.
3. Keep track of how much produce was **harvested** and how it was used (Harvest report provided). These forms will be turned in every other month.
4. Attend at least 60% of the workshops offered by SVM in partnership with Floyd Co. Ag Extension Service.
5. Attend all four of the participant meetings.

□ I grant permission to the St. Vincent Mission and Grow Appalachia project to take and use: photographs, digital images, and/or audio of \_\_\_me and/or \_\_\_ my garden for use in SVM files, grant reporting and/or educational materials. These materials might include printed or electronic publications, web sites or other electronic communications. I authorize the use of these images without compensation to me. All negatives, prints, and digital reproductions shall be property of the St. Vincent Mission and shall be shared with me upon request.

□ I grant permission to the St. Vincent Mission and Grow Appalachia project to take and use: photographs, digital images, and/or audio of my minor child (or children) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for use in SVM files, grant reporting and/or educational materials. These materials might include printed or electronic publications, web sites or other electronic communications. I authorize the use of these images without compensation to me. All negatives, prints, and digital reproductions shall be property of the St. Vincent Mission and shall be shared with me upon request.

I understand that I am not employed by St. Vincent Mission and will not hold St. Vincent Mission responsible for any injury or property damage that occurs as a result of negligent actions by myself or family members. I hereby agree that I will not allow any person under the age of 18 to use the tiller or any other mechanized equipment owned by St. Vincent Mission.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Signature Date Coordinator Signature Date

**Grow Appalachia Application**

**St. Vincent Mission**

Name Age

Mailing Address

Garden Address

County

Phone 2nd Phone

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# of Children under 18yrs? # of Adults over 18yrs? Total # of People? \_\_\_\_\_\_

Names and ages of all children/adults living in the household.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Age/Gender | Name | Age/Gender |
| 1. |  | 5. |  |
| 2. |  | 6. |  |
| 3. |  | 7. |  |
| 4. |  | 8. |  |

Are you a single parent household? \_\_\_\_\_\_\_\_\_\_\_

Are you a grandparent raising your grandchildren? \_\_\_\_\_\_\_\_\_\_

Estimated Monthly Household Income? \_\_\_\_\_\_\_\_\_\_\_\_

What is the approximate size of your garden in square feet? \_\_\_\_\_\_\_\_\_\_

Will you sell produce at the farmers market? \_\_\_\_\_\_\_\_\_\_

How many years prior to 2023 have you participated in Grow Appalachia? \_\_\_\_\_\_\_\_\_\_

Will you need assistance tilling your garden? \_\_\_\_\_\_\_\_\_\_

What approximate date would you like your garden tilled? \_\_\_\_\_\_\_\_\_\_\_\_\_

How many people will your garden feed? \_\_\_\_\_\_\_\_\_\_

Is it okay to put a picture of you & your garden on the website or blog of Grow Appalachia? \_\_\_\_\_\_\_\_\_\_

Is anyone in your household included in the following categories? Please state how many individuals.

|  |  |
| --- | --- |
| Disabled |  |
| Retired |  |
| Veteran |  |
| Former Tobacco Farmer |  |
| Below the national poverty line |  |