



School, Demonstration, & Community Garden Funding Request Form

For questions, please contact Laura Taylor: laura@wmswcd.org or 503.238.4775 x112. Please include a project narrative of no more than 1 page, explaining your project and how funding would be used. No formal budget is required, but you are welcome to submit one. The funding limit is \$2,000.00 per year for up to three years.

Applicant Information			
Garden Name:		Application Date:	
Amount Requested:		Funds Needed by:	
Landowner Name:			
Project Manager & Contact Information (if different than landowner):			
Fiscal Manager & Contact Information (if different than landowner/project mgr.):			
Garden Address:			
Project Manager Phone:			
Project Manager Email:			
Required Permits obtained & status (if applicable)	N/A	No	Yes
Terms & Conditions			
<p>By signing the Application, the applicant certifies that: District funds will be used only for the purposes approved by the District and will not be used for lobbying, for attempts to influence voting or legislation, or for litigation of any kind. The project/event will comply with the District's nondiscrimination policy (The District prohibits discrimination in all of its programs and activities on the basis of race, color, national origin, age disability, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisals, or because all or part of an individual's income is derived from any public assistance program). The applicant organization agrees to be responsible for its own actions and for any damage or third party liability arising from the organization's activities related to its agreement with the District. It agrees to indemnify and hold harmless the District and its officers, directors, agents, and employees under the agreement. The applicant agrees that obtaining permits is not the responsibility of the District. The District will not be held responsible for the safety of organizers or participants in the project/event, or for providing insurance coverage. (The applicant organization is advised to check to be sure adequate insurance coverage is obtained for the project/event).</p>			

Signature of Applicant (Original signatures must be received by the District)

By signing this form, I confirm that the above information is true and accurate. I certify that my organization will abide by the terms outlined above, which includes utilizing this form as a formal Agreement.

 Landowner Signature (Please use blue ink) & Title

 Date

 Project Manager Signature -if different than landowner (Please use blue ink) & Title

 Date

 West Multnomah Funding Approval Signature (Please use blue ink) & Title

 Date

By signing this application you are providing WMSWCD permission to post a 18"x24" sign on your property as well as publicize your project.

WMSWCD Funding Request Form Project Narrative