NORTHERN ASSOCIATION OF COMMUNITY COUNCILS

Northern Healthy Foods Initiative
9-395 Berry St., Winnipeg, MB R3J 1N6
Phone: (204) 947-2227 Ext 2
Toll Free: 1-888-947-6222
Fax: 204-947-9446
Email: programnhfi@naccmanitoba.com

Seeds of Change Program

Gardener Application and Report

Winter deadline to submit: **February 15**
Spring deadline to submit: **June 15**

*Submit receipts **once only** by email or fax, no later than the deadline date for your community.

Applicant Information

Community:
Community Food Champion:
Phone:
Mailing address:
Phone:
Email:

Applicant Request

Select one:

- ☐ Free garden seeds (NACC to place small orders by request only), OR
- ☐ Gardening subsidy/reimbursement with receipts

Names of all people participating in the household:

Number of participants in each age group.
Child 0-14:
Youth 15-29:
Adult 30-64:
Senior 65+:

Size of all existing gardens (example: 10′ x 10′ = 100′^{2}):

Size of new gardens (if any):

Number of people you grow for:

Number of people ages 15-29 (Youth) helping with the garden:

Number of people aged 65+ (Senior) helping with the garden:

I wish to (check all that apply):

- ☐ Request a garden mentor or helper
- ☐ Volunteer to be a gardening mentor
- ☐ Help the local Community Food Champion with garden seed distribution

Seed order (include type and quantity):

- ☐ Potatoes Type: Quantity:
- ☐ Lettuce Type: Quantity:
- ☐ Radish Type: Quantity:
- ☐ Kale Type: Quantity:
- ☐ Onion bulbs Type: Quantity:
- ☐ Celery Type: Quantity:
- ☐ Garlic bulbs Type: Quantity:
- ☐ Carrots Type: Quantity:
- ☐ Green Onion Type: Quantity:
- ☐ Parsnips Type: Quantity:
- ☐ Tomatoes Type: Quantity:
- ☐ Beets Type: Quantity:
- ☐ Beans Type: Quantity:
- ☐ Corn Type: Quantity:
- ☐ Cabbage Type: Quantity:
- ☐ Peas Type: Quantity:
- ☐ Cauliflower Type: Quantity:
- ☐ Pumpkin Type: Quantity:
- ☐ Cucumbers Type: Quantity:
- ☐ Peppers Type: Quantity:
- ☐ Broccoli Type: Quantity:
- ☐ Squash Type: Quantity:
- ☐ Dill Quantity:
- ☐ Parsley Type: Quantity:
- ☐ Mint Quantity:
- ☐ Sage Quantity:
- ☐ Other medicinal plant:
- ☐ Other seeds/fertilizer/small garden supplies:

Gardening Applicant Agreement

By signing this form, I agree to:

- Prepare, plant, water, or arrange for care of my garden/fruit trees
- Report my garden and fruit tree production (Lbs) to my Community Food Champion each fall

SIGN AND KEEP A COPY FOR YOUR RECORDS

Print Name(s):
Date:
Signature:

Photo Permission

I give permission for NACC and partners of the Northern Healthy Foods Initiative to use photographs taken of me, and my children listed on this form, for the purposes of publication, display, articles, promotions, websites, social media and visual presentations without payment or compensation to me.

I understand that these photos may be used to tell the story of northern Manitoba communities taking action and leading efforts to improve food security, community development, youth and senior engagement, and population health.

By signing this form, I confirm that I am over 18 years of age and/or a guardian of the participant(s).

Date:
Signature:

OR Check here: ☐ for NO PHOTOS

End of Season Report

(Please submit with 5 photos to your CFC)

Approximate pounds (Lbs) vegetables produced:

Approximate pounds (Lbs) fruit/berries produced:

Fruit and berry trees (list quantity, type and year planted):

Submit your report and any required photos or materials to:

Northern Association of Community Councils
Northern Healthy Foods Initiative
9-395 Berry Street
Winnipeg, MB R3J 1N6
Fax: 204-947-9446
Email: programnhfi@naccmanitoba.com