



The Gardeners of America/Men's Garden Clubs of America

Gardening Education and Excellence in Horticulture since 1932
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www.gardenersofamerica.club

**Youth Gardening "Favorite Flowers"
Record and Results form for National Contest**

Please fill in this form and send it with (at least) three photos (one from each phase) of your child and the container garden to TGOA Youth Gardening Chair Cheri Kessen, 1205 Limberlost Trail, Rome City, IN 46784 or ckessen2001@yahoo.com. Be sure a parent or guardian signs the bottom. **Contest deadline is November 15.**

1. My name is: _____ My age is: _____
2. The name of the TGOA/MGCA club sponsoring me is: _____
_____ in the state of _____
3. The flower(s) I am entering are all one kind _____, a mixture _____,
a themed group _____, a single potted flower _____, other _____
(explain) _____.
4. The name of my flower(s) is (are) _____
5. Why did you decide to choose this plant?
6. Describe what you did to help your plant to grow.
7. What problems or disappointments did you have?
8. What did you learn by doing this activity?
9. What was the most fun about this growing experience?

I succeeded because _____ helped me.

Permission to place photos in TGOA club newsletters given by:

Parent/Guardian: _____

Address: _____

Email: _____