OSWEGO COUNTY OUTDOOR 4-H FLOWER GARDEN PROJECT

RECORD SHEET

My Flower Garden Record for (year)	
NameAgeClub	
Address	<u>. </u>
Yrs. in Club Work Yrs. in 4-H Flower Gardening	
Leader (or parent) Signature	
PROJECT REQUIREMENTS	
 Grow at least 5 different flowers, regardless of type, starting indoors or outdoor purchased plants. Have at least three (plants) of each type of flowering plant. Fill in this record sheet. Attach a plan and/or pictures for a complete record. Give a brief description of your garden purpose, location (ie. walk edge) and grow conditions (ie. shade, sun). Did you use mulch? If so, what kind? 	
	£:

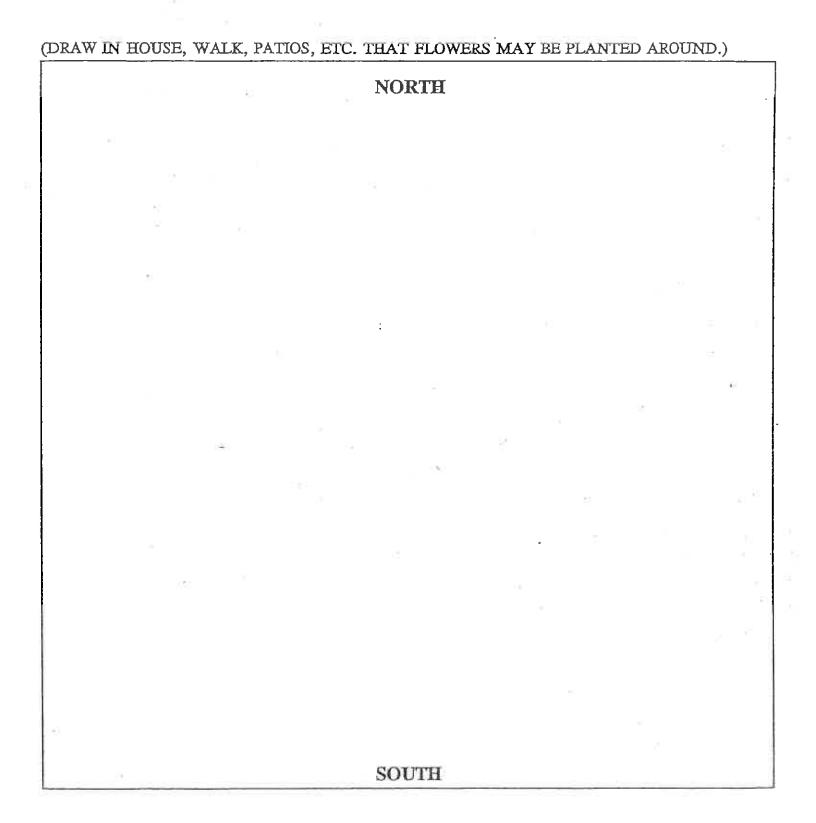
IND OF LOWER	VARIETY	ATE LANTED	COLOR		WILL YOU GROWN THIS AGAIN?
		<u>.</u>			
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с.					
74				2	
			-		

*B = Biennial *P = Perennial *A = Annual

MUST BE FILLED IN

Remarks: Problems, insects, uses of flowers, attended any meetings, tours, etc.)

FLOWER GARDEN MAP



FLOWERS EXHIBITED	WHERE EXHIBITED?	AWARD Excellent-blue Good-red Worthy-white	
	1		
	7		
	· · ·	14 (A)	
7	3		
		19 1 I I	

RECORD SUMMARY

Cost

This Project

Value of seeds planted	\$	How much time I spent	
Value of plants	\$	now much time I spent	
Fertilizer	\$		
Fools (if any purchased this year) Other	\$ \$	Was very worthwhile	
TOTAL	\$	Taught me many things	(a.

Will be continued