



Youth Contest Registration Form

Youth's Name		Age
Allergies and/or special needs		
Parent's Name		
Address		
City	State	Zip
Phone	Email	
Sponsoring Club		State
Please circle the section(s) you w	vish to enter. You may en	ter more than one section.
1. Pumpkin OR Gourd	2. Sunflowers	3. Container Gardening
4. Favorite Flowers 5.	Perfect Plant 6. M	eet My Terrific Tree
Each section has three phases: Pl Season. A picture is required wit parental or guardian permission to promotional materials of The Ga form to make the permission legal	h the youth and the proje to place photographs and rdeners of America. A pa	ct from each section. We need names of the youths in
Print Parent/Guardian name		Date
Signature		Circle: Parent or Guardian
Send large-format digital images age on each photograph.	to goafortwayne@gmail	.com with youth's name and
This year, contestants are divided	d into age groups: 5 and u	under, 6-11, and 12-17.
The Gardeners of America Youth registration form NOW and all o Gardening National Chair, Cheri Limberlost Trail, Rome City, IN	ther entry forms no later Kessen, at <u>goafortwayne</u>	than Oct. 1 to the Youth

We can't wait to see your entries!

Find this form and other Youth Gardening news and ideas at gardenersofamerica.club.