

This sheet must be completed if entering Division II - Flowers

**Flower Growing Information Sheet**

Name of Plant	Date Planted	Annual, Biennial or Perennial	Border, Bedding, or General Garden

1. How did you use your flowers? (sale of, exhibits, bouquets, etc.)

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2. What growing practices did you need to use regarding fertilizer, mulching, and insect control?

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3. Which experiences were most interesting in this project? \_\_\_\_\_