National Garden Clubs, Inc.

FORM 8

FLOWER SHOW SCHOOL STUDENT ROSTER

Email completed form to NGC Accrediting Chairman for that Region.

COURSE NUMBER: _____ Page: _____

CITY, STATE: _____ DATES SCHOOL HELD: _____

STATE FLOWER SHOW SCHOOL CHAIRMAN: _____

INSTRUCTORS: HORTICULTURE: _____ DESIGN: _____

FLOWER SHOW PROCEDURE: _____

ALPHABETICAL LISTING NAME AND ADDRESS	Written Exam FSP	Written Exam Horticulture	Point Scoring Class 1	Point Scoring Class 2	Written Exam Design	Point Scoring Class 1	Point Scoring Class 2	Total Pts