National Garden Clubs, Inc.

MULTIPLE REFRESHER CONSULTANT FORM

Name _____
First *Middle Initial* *Last*

Address _____
Street *City* *State* *Zip code (9-digit)*

Email: _____

Telephone: _____ **Region:** _____

State Garden Club or Int'l Affiliate Club: _____

Event Site: _____

Date(s): _____

Please select your refreshing school/s and fill in the appropriate information for each school.
Include one check written to sponsor for $5.00 for each refresher selected.

☐ **Environmental Studies**

MOST RECENT CONSULTANT RECORD (School or Refresher)

_____
Event

_____ _____ _____
(City/State) *Date(s)* *Expiration Date*

Are you a Master Consultant? Yes ☐ No ☐ If no, is this your fourth refresher? Yes ☐ No ☐

☐ **Gardening Study**

MOST RECENT CONSULTANT RECORD (School or Refresher)

_____
Event

_____ _____ _____
(City/State) *Date(s)* *Expiration Date*

Are you a Master Consultant? Yes ☐ No ☐ If no, is this your fourth refresher? Yes ☐ No ☐

☐ **Landscape Design**

MOST RECENT CONSULTANT RECORD (School or Refresher)

_____
Event

_____ _____ _____
(City/State) *Date(s)* *Expiration Date*

Are you a Master Consultant? Yes ☐ No ☐ If no, is this your fourth refresher? Yes ☐ No ☐