



National Garden Clubs, Inc. Gardening Study

Multiple Refresher Form 3b-14

MULTIPLE REFRESHER ROSTER Consultant and Master Consultant Refreshers

Bi- or Tri-Refresher (Title): _____

Date(s) Site (City / State) State Garden Club (e.g. NY, NCA, etc.) or Int'l Affiliate Club

ROSTER: Separate Consultants refreshing credentials and Master Consultants. Please list names alphabetically by last name. Use first, middle initial, and last. State Garden Club: Please circle or highlight Club if Consultant lives out-of-state or is affiliated out-of-state. Int'l Affiliates Club: Please circle or highlight Club if individual is affiliated with a different Club.

To fill out the columns, type across the page, using the space bar to separate entries. U!^•Á}c!Á!Á ^c0g^E

Name Address / ZIP State Garden Club (e.g. NY, NCA, etc.) or Int'l Affiliate Club Date of Last Certificate

Gardening Study Consultants:

Submitted by: _____ Date Submitted: _____

Event Chairman: _____

Gardening Study Consultants:

Name	Address / ZIP	State Garden Club (e.g. NY, NCA, etc.) or Int'l Affiliate	Date of Last Certificate