

National Garden Clubs, Inc.

FORM 14

Judge is to mail the completed form to the State Credentials Chairman following the second Symposium accreditation.

			DATE:			
NAME:		GARDEN CLUB:ar on certificate as above)				
(na	ame will appe	ear on certificate as above)				
ADDRESS:						
Street			City	State	Zip	
-MAIL:			LIFE CERTIFICATE DATE:			
THE APPLICANT N	MUST HAVE:	FIRST COURSE LISTED BE 2. FULFILLED SYMPOSIUM A 3. PASSED ALL POINT SCORI 4. EACH SYMPOSIUM TAKEN	ELOW. ATTENDANCE REQU NG EXAMINATIONS N AT LEAST FOUR N	IN THE SYMPOSIUMS LISTED BELOV		
		FIRST SYMPOSIUM		SECOND SYMPOSIUM		
STATE SPONSOR:						
LOCATION:						
DATE:						
POINT SCORING GRADES:	HORT	_DESIGN	HORT	DESIGN		
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State Flower Show Judges Credentials Chairman Signature