

## RCMGA 2018 Plant Sale Intake Form

### To be completed at plant check-in.

Donor Name: \_\_\_\_\_

Plant Name: \_\_\_\_\_

Cultivar or Variety/Native: \_\_\_\_\_

Flower Color? \_\_\_\_\_ Size, Dwarf? \_\_\_\_\_

Circle One: Annual Fruit Grass Ground Cover Herb Houseplant Perennial Shrub Succulent Tree Vegetable

### To be completed at potting table.

# of Labels needed: \_\_\_\_\_

#### Check box for each completed step.

ID       Pot/Clean/Water       Labeled       Greenhouse/Pricing

2/11/18

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