



2017 Grow Show Registration Form

Floral Design Division

Class _____

Co-Exhibitor(s) _____

Date _____

Name _____

Address _____

Telephone No. _____

Email _____

Are you a member of Berkshire Botanical Garden?

Yes _____ No _____

Are you a member of a Garden Club?

Name _____ Zone _____

Are you a member of (please check all that apply)

Chesterwood _____ Frelinghuysen Morris House & Studio _____

The Mount _____ Naumkeag _____ Olana _____

How did you hear about the Grow Show?

Previous exhibitor _____ Website _____ Email _____

Cuttings Magazine _____ Friend _____

One of the museums (please list which one) _____

Other _____

Please complete one Registration Form per entry and email to Elizabeth at everaldi@berkshirebotanical.org

Each entrant must list all plant material using Botanical and Common Names. If you have any questions, please get in touch with the consultant for your class. Bring this with your arrangement on the day of the show as it will be part of the required information on your entry card.

Class _____ Entry Number _____

PLANT MATERIAL:

Botanical Name

Common Name
