Name _____ AVSA Registration # _____

Date Registered _____ Hybridizer _____

Description

_____
_____
_____
_____
_____

Date Received: _____
Purchased/Received From: _____

Size When Received: ___Leaf___LWB___Sucker___Baby___Starter___Large___Bloomstalk
Condition When Received: _____

Isolation Dates: _____
Preventive Treatments: _____

Date First Bud Appeared: _____ Date in Full Bloom: _____
Blooming True _____ Not True _____

General Growing Comments: _____
_____
_____
_____
_____

Propagation Record

Method	Date	Results

Diseases/Problems	Remedy Used	Date(s)

Potting Record

Date	Mix	Pot Size	Date	Mix	Pot Size