

ST. CATHARINES & AREA AQUARIUM SOCIETY AQUATIC HORTICULTURE AWARD APPLICATION

PARTICIPANT'S NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

Plant Name - Botanical \_\_\_\_\_

Common name or Code # \_\_\_\_\_

Reference Material

Method of reproduction: (runner, seed, cuttings, plantlets, rhizome, etc.) \_\_\_\_\_

Book Title \_\_\_\_\_

Author \_\_\_\_\_

Page No. \_\_\_\_\_

Size of Aquarium/Pond \_\_\_\_\_

Established how long \_\_\_\_\_

Type of Lighting - Fluorescent \_\_\_\_\_ Incandescent \_\_\_\_\_ Duration \_\_\_\_\_

Type of bulb \_\_\_\_\_ Colour of bulb \_\_\_\_\_

Temperature of Tank \_\_\_\_\_ How maintained: Heater \_\_\_\_\_ Room temperature \_\_\_\_\_

Fish present and Type: \_\_\_\_\_

Other plants present: \_\_\_\_\_

Water conditions (pH, hardness, etc.) \_\_\_\_\_

Filtration: Types: \_\_\_\_\_ Duration: \_\_\_\_\_

Snails present:  Yes  No Type of snail \_\_\_\_\_

Algae present:  Yes  No Colour \_\_\_\_\_

Water changes \_\_\_\_\_ % Frequency \_\_\_\_\_

Water additives used: (fertilizers, medications, etc.) \_\_\_\_\_

Substrate material used:  Gravel Size \_\_\_\_\_ Colour \_\_\_\_\_

Sand Size \_\_\_\_\_ Colour \_\_\_\_\_

Other Specify \_\_\_\_\_

Was plant potted?:  Yes  No (If yes, give particulars. e.g.- type of soil, pot size, etc.. Be specific)

Date of propagation (THIS MAY BE A PERIOD OF TIME) \_\_\_\_\_

Did your plant flower? (IF APPLICABLE)  Yes  No (MUST BE VERIFIED) \_\_\_\_\_

Additional comments: (observations or facts not noted above) \_\_\_\_\_

PARTICIPANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

A.H.A.P. REP. SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

CLASS ASSIGNED \_\_\_\_\_

POINTS AWARDED \_\_\_\_\_

PLANT DONATED FOR AUCTION  YES  NO \_\_\_\_\_

DATE \_\_\_\_\_