



The Greater Akron Aquarium Society Horticulture Award Program



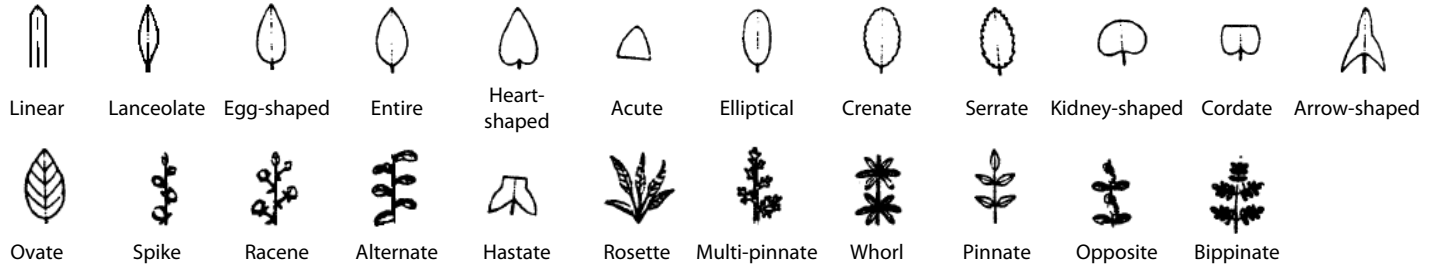
Aquarist's Name _____

Scientific Name _____

Common Name _____

Class of Plant: _____

Description of Plant: _____



Tank Conditions: Temp _____ PH _____ Hardness _____

Type of filtration _____

Lighting _____ Average hours per day _____

Describe tank setup, special conditions, or requirements:

Information on the Propagation: Type of propagation _____

Size of plant _____ Number of leaves _____ Approximate age _____

Care of the Seeds or Plantlets: Same as tank above _____ Temp _____ PH _____ Hardness _____

Type of filtration _____

Lighting _____ Average hours per day _____

Describe tank setup, special conditions, or requirements:

Breeders Signature: _____ Date: _____

Verified By: _____ Date Requirments met: _____

Verification by: _____ Article: Auction: Photograph: Monetary:

Chairperson's Signature: _____