Master Gardener Continuing Education Garden Visit Form

Your Name_____ One Credit for Self-Guided Tour____

Name of Garden _____ Two Credits for Guided Tour_____
Location _____Length of Visit_____
Describe the gardens you visited _____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

List 5 plants you observed (common & botanical names) and why you found them particularly interesting or garden worthy_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Describe what you liked the best about these gardens and also what you believe needed improvement
_____
_____
_____
_____
_____
_____
_____
_____
_____

If you prefer answering these questions on another sheet of paper and attaching them to this sheet it is acceptable. Remember to include your name when filling out this form.