

Seed Donation Form

Please fill out as much information as you are able and return with your seed donation.

| Common Name: |
|--|
| Scientific Name: |
| Variety: |
| Original Seed Source: |
| Open-pollinated/heirloom seeds? |
| yes no unsure |
| Attempts to prevent cross-pollination (isolation, distance, hand- |
| pollination, planting only one variety from each family, etc.)? |
| yes no unsure |
| Location/Date of harvest: |
| Notes/Story: |
| |
| |
| |
| Name: |
| * By signing you acknowledge that the seed you are donating has been grown, harvested, and replanted |
| Phone #: |

Thank you for saving and sharing seeds with your Seed Library!



Seed Donation Form

Please fill out as much information as you are able and return with your seed donation.

| Was this plant exposed to creek or river water or any type of chemical/pasture run-off during the flooding of 2018? |
|--|
| Common Name: |
| Scientific Name: |
| Variety: |
| Original Seed Source: |
| Open-pollinated/heirloom seeds? yes no unsure |
| Attempts to prevent cross-pollination (isolation, distance, hand-pollination, planting only one variety from each family, etc.)? |
| yes no unsure |
| Location/Date of harvest: |
| Notes/Story: |
| |
| |
| Name: * By signing you acknowledge that the seed you are donating has been grown, harvested, and replanted by you for at least 3 years. Phone #: |

Thank you for saving and sharing seeds with your Seed Library!