

**SEED DONOR'S FORM - GARDEN COLLECTED ONLY ON THIS SIDE**

Please complete this form as requested and enclose with your seed donation. **Use this side for Garden collected seed only.** Use the reverse of this form for **Wild collected seed.** Please fill in your personal details on this side of the form. If you do not know the full name of a plant, please include information about height, colour, etc

Name .....

Address .....

Country .....

Membership number .....

E-mail address (only for use by the Seed Exchange) .....

**AGS use only**      **Packet Number**      **Name of Plant in ALPHABETICAL ORDER please**  
**only**           **Garden Collected Seed only on this side**

|                          |    |       |
|--------------------------|----|-------|
| <input type="checkbox"/> | 1  | ..... |
| <input type="checkbox"/> | 2  | ..... |
| <input type="checkbox"/> | 3  | ..... |
| <input type="checkbox"/> | 4  | ..... |
| <input type="checkbox"/> | 5  | ..... |
| <input type="checkbox"/> | 6  | ..... |
| <input type="checkbox"/> | 7  | ..... |
| <input type="checkbox"/> | 8  | ..... |
| <input type="checkbox"/> | 9  | ..... |
| <input type="checkbox"/> | 10 | ..... |
| <input type="checkbox"/> | 11 | ..... |
| <input type="checkbox"/> | 12 | ..... |
| <input type="checkbox"/> | 13 | ..... |
| <input type="checkbox"/> | 14 | ..... |

**GARDEN COLLECTED SEED ONLY ON THIS SIDE**

AGS use only

W      B

|  |  |
|--|--|
|  |  |
|--|--|

**AGS use only**      **Packet Number**      **Name of Plant in alphabetical order please**  
**only**           **Garden Collected Seed only on this side**

|                          |    |       |
|--------------------------|----|-------|
| <input type="checkbox"/> | 15 | ..... |
| <input type="checkbox"/> | 16 | ..... |
| <input type="checkbox"/> | 17 | ..... |
| <input type="checkbox"/> | 18 | ..... |
| <input type="checkbox"/> | 19 | ..... |
| <input type="checkbox"/> | 20 | ..... |
| <input type="checkbox"/> | 21 | ..... |
| <input type="checkbox"/> | 22 | ..... |
| <input type="checkbox"/> | 23 | ..... |
| <input type="checkbox"/> | 24 | ..... |
| <input type="checkbox"/> | 25 | ..... |
| <input type="checkbox"/> | 26 | ..... |
| <input type="checkbox"/> | 27 | ..... |
| <input type="checkbox"/> | 28 | ..... |
| <input type="checkbox"/> | 29 | ..... |
| <input type="checkbox"/> | 30 | ..... |
| <input type="checkbox"/> | 31 | ..... |
| <input type="checkbox"/> | 32 | ..... |
| <input type="checkbox"/> | 33 | ..... |
| <input type="checkbox"/> | 34 | ..... |
| <input type="checkbox"/> | 35 | ..... |