

WFPL Seed Donation Form

Date:_____ Seed source:_____

Your name:_____

Crop name: _____

Scientific name if known:_____

Variety name:_____

Did you isolate to prevent cross-pollination? If so, how?
(hand-pollinating, caging, physical distancing, timing, etc.)

Did you have any issues growing this crop? (Disease
issues, pest damage, etc.) If so, how did you address this?

Anything else you want us to know? (Fertilizing, how it
grew, how it tasted, etc.--any information you think will help
future gardeners)

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