

**Bayfield County
4-H Horticulture Project Record for 20__**

Name: _____ Age: _____ Years in Project: _____

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Did you plant a **vegetable garden**? ___Yes ___No

If yes, make a diagram of your garden on the back of this page showing vegetables planted.

What was the favorite vegetable you grew and why? _____

Did you plant a **flower garden**? ___Yes ___No

If yes, make a diagram of your flower garden on the back of this page giving the names of the flowers planted.

Name some of the flowers you planted: _____

Which of the flowers you grew was your favorite and why? _____

Did you raise **houseplants**? ___Yes ___No

What plants did you raise? _____

Of the plants you raised, which was your favorite and why? _____

Horticulture Project Expenses:

Items Purchased:	Cost:
Seeds	\$
Plants	\$
Bulbs	\$
Flower Pots	\$
Fertilizer	\$
Spray Materials	\$
Garden Tools	\$
Other:	\$
	\$
	\$
TOTAL:	\$

Number of club project meetings I attended this year: _____

Number of County project meetings I attended this year: _____

Project Activities (tours, demonstrations, etc.): _____

What was your favorite activity related to the Horticulture project this year? _____

(Add photos of your project vegetable garden, flower garden or houseplants.)

DIAGRAM OF YOUR GARDEN