

SMARTSCAPES - Planning to Prevent Problems

Enrollment Form FOR 2025 ONLY- Please Print legibly!

		Daytime Phone:	
Address: City			
Zip Code:	Cell Phone:	Evening Phone:	
	IMPORTANT)		
(SMARTSCAPES	documents will be sent electronically to s	ave paper and postage)	
September 30, volunteers to co	2025. As a participant of the program	5 program. I understand enrollment begins April , I give my permission to Henrico VCE Maste ccape. Visits will last up to one hour. I understants.	r Gardener
Signature:		Date:	
	for the above program fees. Please make and this registration form by September 3	your check payable to "Henrico Master Garden 30, 2025 to:	er Fund."
	Henrico Extension Office, P.O. B	ox 90775, Henrico, VA 23273-0775	
and assess the la and shrubs on th Assessments are Please understa	andscape. This assessment will include a contemporty. The prioritized by date of receipt with payme and that the Master Gardeners are volunt or of visits are made available on a first-contemport	Master Gardener volunteers who will visit your p liscussion of soil sampling, and evaluating the car nt, weather, soil moisture and volunteer availabil eers, so their schedules and availability vary. me-first-served basis, we reserve the right to clos	e of trees
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rollment in the p Would you lil the address area How did you hear about our program? Virgin Coop Exter	 be added to our Horticulture Email D be added to our Horticulture Email D be above and is LEGIBLE. Master Gardener Volunteer Word of Mouth Word of Mouth Virginia Cooperative Extension is a partnersh local governments. Its programs and employ gender, gender identity, gender expression, information, military status, or any other bas If you are a person with a disability and desi discuss accommodations. *TDD number is (istribution List? Please make sure your email is ir Online Online Newsp Other Newsp into of Virginia Tech, Virginia State University, the U.S. Department of Ag ment are open to all, regardless of age, color, disability, sex (including p national origin, political affiliation, race, religion, sexual orientation, gen sis protected by law. re any assistive devices, services or other accommodations to participate on Office at (804) 501-5160/TDD* during business hours of 8:00 a.m. a	ntee en- cluded in aper iculture, and regnancy), etic

SMARTSCAPES Program Client Pre-Survey Questions

Please answer the following questions to the best of your ability. If you are unsure of how to answer any of the questions, you may wait to answer the question with the Master Gardener volunteer.

Note: For the safety of our volunteers, we reserve the right to forego sampling and evaluating properties where pets cannot be removed from the sampling area during the stated evaluation time frame.

Soil Test: Do you know your soil?

- _____My lawn/garden/beds (circle which ones apply) have been soil tested.
- _____I make adjustments to my soil pH based on the soil report.
- _____My soil is predominately: clay/sand (circle one).
- _____I use compost as an amendment to improve my soil.

Match Plants to Site

- _____I know which areas of my yard are sunny, shady or in between.
- _____I know which areas of my yard are well drained or poorly drained.
- _____I have identified the plants in my landscape.
- _____I know which plants are in the right site because they are thriving.
- _____When selecting new plants, I select the right plant for the site.
- _____I select healthy, disease-free plants.

Arrange Plants

- _____I dig a wide, shallow hole when planting trees and shrubs.
- _____I do not amend planting holes for single trees or shrubs.
- _____I do amend entire planting beds with compost.
- _____I think about plant placement /mature size when choosing plants.

Rain and Irrigation

- _____I avoid light, frequent watering. Instead, I water deeply as needed.
- _____I irrigate early in the morning to reduce evaporation and discourage disease-avoiding overhead watering.

Trouble Free Installation and Maintenance

- _____I install new plants in the spring or fall and water these until established.
- _____I remove dead, dying, diseased, and damage limbs whenever I see them.
- _____I prune plants in the proper time of year.
- _____I identify insects, weeds, and diseases before attempting to control them.
- _____I physically remove pests when possible.
- _____When pesticides are needed, I choose the least toxic to protect beneficial insects.
- _____I read and follow all label directions when applying pesticides.



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