



SMARTSCAPES - Planning to Prevent Problems

Enrollment Form FOR 2022 ONLY

Name: _____ Daytime Phone: _____

Address: _____ Zip Code: _____

Cell Phone: _____ Evening Phone: _____

Email Address: (IMPORTANT) _____

(SMARTSCAPES documents will be sent electronically to save paper and postage)

Authorization: I want to participate in the SMARTSCAPES program. I understand enrollment begins April 1 and ends October 15, 2022. As a participant of the program, I give my permission to Henrico VCE Master Gardener volunteers to come onto my property to assess my landscape. I understand the base fee (\$10.00) covers an on-site visit and program materials.

Signature: _____ Date: _____

Enclose a check for the above program fees. Please make your check payable to **“Henrico Master Gardener Fund.”** Mail your check and this registration form by October 15, 2022 to.

Henrico Extension Office, P.O. Box 90775, Henrico, VA 23273-0775

SMARTSCAPES will include a visit by Henrico VCE Master Gardener volunteers who will visit your property and assess the landscape. This assessment will include a discussion of soil sampling, and evaluating the care of trees and shrubs on the property.

You will receive the book *Native Plants for Virginia’s Capital Region* and Virginia Cooperative Extension publications that are chosen specifically for you to answer your landscape questions.

Assessments are prioritized by date of receipt with payment, weather, soil moisture and volunteer availability.

Please understand that the Master Gardeners are *volunteers* so their schedules and availability vary.

A limited number of visits are made available on a first-come-first-served basis, we reserve the right to close the program when we have reached capacity. Submission of a completed application and payment does not guarantee enrollment in the program.

How did you hear about our program?

Master Gardener Volunteer

Online

Newspaper

Word of Mouth

Other _____



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If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this program, please contact the Henrico Extension Office at (804) 501-5160/TDD* during business hours of 8:00 a.m. and 4:30p.m. to discuss accommodations. *TDD number is (800) 828-1120.

FOR OFFICE USE ONLY

DATE RECEIVED: _____

CHECK # _____

AMOUNT \$ _____