Exhibitor Name ______________________________ Grade in School _________

Club or Chapter ___________________________________ __________________

I hereby certify that as the exhibitor of this (these) project(s), I have personally been responsible for the care of this (these) horticulture plants, have kept records, and have personally completed this record book.

____________________________________________    ___ _________________
Exhibitor’s Signature        Date

This student is an active member of the ____________________________ FFA Chapter / 4-H Club, and is eligible to show horticulture exhibits at the Polk County Youth Fair. I verify that this record book has been completed by the student, and is an accurate representation of the project.

____________________________________________    ___ _________________
FFA Advisor’s / Club Leader’s Signature         Date