



NIAGARA PARKS  
**SCHOOL of  
HORTICULTURE**



**REGISTRATION FORM**  
**Master Gardeners of Ontario Inc.**  
**July 16 & 17, 2016**

Date: \_\_\_\_\_ Master Gardener Group \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Accessibility Requirements: \_\_\_\_\_

**You may choose two of the following programs:**

1. IPM - Using the Tools to Beat Key Ontario Pests: Phenology, Entomology, Organics.
2. Tree Assessment (Structure Review, Hazard Review and Risks Assessment).
3. The Tiny Garden - Big Thinking for Small Spaces.

**Please mail your completed registration form to:**

Niagara Parks School of Horticulture  
Attention: Master Gardeners of Ontario Inc.  
P.O. Box 150  
Niagara Falls, Ontario  
L2E 6T2

**Your registration is not considered complete unless accompanied by payment of cheque or credit card and a signed waiver.**