



The Tommyn Flaxman Memorial Bonsai Competition **(Indigenous)**

Name of Entrant (Owner of tree): _____

Address: _____

Telephone: _____

Cell: _____

E-mail: _____

I am a member in good standing of (club): _____

Tree entry:

Botanical name of tree: _____

Common Name of tree: _____

Height (from base of tallest tree to its apex): _____

Origin of pot or container: _____

Original designer: _____

Brief history of the planting to be submitted (optional): _____

Name of Photographer: _____

The image submitted to this competition is unaltered and the plant that was photographed is currently alive.

Name: _____ Signature: _____

Date: _____