

Master Gardener Program

WSU	County Extension	
WSU Master Gardener Re-Application Form for Year 20		
In order to continue to be a Certified WSU Is completing 25 required hours plus 10 hours Volunteer Hours Reporting Database on a rapplication form stating that you wish to coal leave for one year, if you are a current Moorogram enrollment will expire.	s continuing education, re monthly basis, and returni ontinue as a WSU Master (porting hours in the WSU ng this signed re- Gardener. You may request
Check the box that applies I am unable to participate actively descember 31, 20 I understand WSU certification. TIME TO RETIRE. Please remove my no longer be included in the MG Direction. I wish to BE ACTIVE in the Master Gase My address has changed since my labeled have changed. Please print legibly Name:	I I may only be on leave fo name from the mailing listectory. ardener Program in the ye	r one year and retain my et. I understand that I will ear 20
Address:		
City:	State:	Zip:
Home Phone:	Email address:	
Emergency Contact:		
Relationship	Contact Number	
Return to: WSUCounty	Extension	
Sign Here:		Date: