

FEDERATION OF AMERICAN AQUARIUM SOCIETIES
HORTICULTURE AWARD PROGRAM FORM

Name: _____ HAP # _____

Society Name _____ Date _____

Scientific Plant Name _____ Code if not Ided _____

Common Plant Name _____

Reference Source Used for ID _____ Page # _____

Type of Reproduction _____

Describe the Aquarium (pond), contents, equipment, lighting (type and duration), water conditions and other living creatures in the aquarium (pond). (If space is not adequate for all comments, please use reverse side of form.)

Water changing frequency _____ Type replacement _____

Were snails present _____ Type _____

Was any algae on plants _____ Color or type _____

Did you treat the fish with medications while plants were in tank (pond)? _____

What medications _____

Participants Signature _____ Date _____

HAP Chairpersons signature _____

Class assigned _____ Points awarded _____