

- Phone Event
- Email Walk In
- Mail

Client Contact Form

Log #: _____

MG Name: _____

Client name: _____ Today's Date: _____

How did you learn about the Master Gardeners? _____

Address: _____

Town: _____ Zip: _____

Phone: _____ Email: _____

Brief description of problem: _____

FOR MASTER GARDENER USE ONLY

Problem category:

- Herbaceous plant Houseplant Landscape Soil Crop
- Tree or Shrub Water Wildlife Weed Lawn
- Insect Other _____

Diagnosis: _____

Recommendations / Fact Sheets Given: _____

Responses to client: _____

Responses to client:

Date	MG Name	Type of contact	Notes
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE CHECK THIS BOX WHEN CONTACT IS COMPLETE!!!

