

American Orchid Society

P.O. Box 565477 Miami, FL 33256-5477

Award Number:	Provisional
Event:	Date:
Plant	
Clonal Name:	
Parent 1	
Parent 2	

Measurement in centimeters	Width/Horizontal	Length/Vertical
Natural Spread		
Dorsal Sepal		
Petal		
Lateral Sepals/Synsepal		
Lip/Pouch		
Plant		
Inflorescence	X	

Description: Begin with the number of flowers, buds, and inflorescences

Award:	Score	points	
Chairman's Name			
Chairman's Signatur	e		
Photographer:			
Exhibitor Name and	Address		
Email Address			
Phone#			

