

HAP FORM

Award Data

Member Name: _____

Dates: Aquired Parent on _____ Propagated on _____ Submitted on _____

Award Class: _____

Verified By: _____

Sold at _____ Meeting / Auction

**This section to be completed
By the HAP Chair only**

Award Points: _____

Plant & Propagation Data

Scientific Name: _____

Common Name: _____

Type of Reproduction (check all that apply):

- Cutting Dubbling Adventitious Runner Rhizome
 Seed Spore Rosette Flower

Substrate (check all that apply):

- Sand Gravel Peat Potting Soil Plant Plug Other

Lighting:

- Natural Sunlight Artificial Lighting

If Artificial Lighting was used:

Type: Fluorescent Incandescent Halogen Metal Halide Sodium Other

Wattage: _____ Brand: _____ Addl Desc: _____

Water Conditions:

Tank / Pond Size: _____ Water Temp: _____ pH: _____ dH: _____

Water Changes: Yes / No (circle one) Amount / Frequency: _____

Salt (riff cichlid salt, etc.) and additives: Yes / No (circle one) Amount: _____

Fish present? Yes / No (circle one) Explain: _____

Fertilizer used? Yes / No (circle one) Brand/Type _____

CO2 used? Yes / No (circle one) Explain: _____