



One Person, One Flower 2011/ 12 – Application Form

Name of School: _____

Type of School: (Please tick the appropriate box)

- Kindergarten Primary School Secondary School

Name of Principal: _____

Name of Contact Person: _____ Post of Contact Person : _____

Contact Tel. No: _____ Fax No: _____

School Address: _____

Number of seedlings requested : _____

Each school may nominate one teacher/ staff to attend the talk on growing of the theme flower, details of the talk will be informed later: (Please tick the appropriate box)

- my teacher/staff **will** attend the talk
- my teacher/staff **will not** attend the talk

Signature of the Principal

School Chop

Date