

DSM Plant Adoption Application

2025

Date _____

Name _____

Address _____

Phone _____ E-Mail _____

Have you been a member of DSM for 1 or more years? Yes ___ No ___

Are you current on Club dues? Yes ___ No ___

Have you attended at least 2 of our annual events (Fall or Winter regular meetings, Dig &/or Sale, Summer bus tour, Show, Banquet/Auction, or a Regional meeting that we host)?

(Please circle which ones) Yes ___ No ___

Have you assisted at one of the above events, or with other help, such as Plant Fairs, special club projects, serve on Board or committees, hosting garden tours, help at a Regional meeting that we host, etc., or donated plants for the Auction or Dig & Sale? (Please circle which ones) Yes ___ No ___

Are you willing to care for your plant and follow the terms of the contract? Yes ___ No ___

What types of daylilies do you prefer to grow? _____

Specific daylily cultivars or hybridizers you recommend for the Club Plant program:

Please scan & email or snail mail or bring to the DSM Fall General Meeting to:

Kris Henning, Plant Adoption Program;

P. O. Box 135, Frederic, WI. 54837; c. ph#715-431-0249, email: kristiehenning@gmail.com.

Submission Deadline: October 26, 2025