

TENNESSEE FEDERATION OF GARDEN CLUBS, INC.
CLUB PRESIDENT'S REPORT OF GARDEN CLUB ACHIEVEMENTS FROM JANUARY 1–DECEMBER 31

Please send 2 completed copies to your District Director **by Jan. 15**. The director will send copies to the TFGC President. Include one copy of your club yearbook for the District Director.

Garden Club: _____ President: _____

President's Address: _____

Home Phone: _____ Cell: _____ Email: _____

Question 1 is the ONLY requirement to be a federated club in good standing. All other questions are to help develop excellent clubs, promote community outreach, stimulate awareness of our concerns and interests, and to enable the district, TFGC, DSGC, and NGC to present awards and grants.

1. Were 3 copies of Form C with club's dues of \$7.00 per member sent to the District Director by May 15 (delinquent June 1) with a list of members' names arranged alphabetically including the correct mailing address and ZIP code + 4, as well as their preference to receive *The Volunteer Gardener* (paper versus website)?
 YES NO (10 pts) _____

NOTE: To compete for Club of Excellence & Awards, continue below. You must receive at least 80 points to be a club of excellence.

2. Are the club's bylaws based on *Robert's Rules of Order, Newly Revised*, with objectives in accordance with the TFGC Bylaws?
 YES NO (10 pts) _____

3. Did your club meet at least 8 times during the year and have at least 6 programs on gardening and related subjects, such as these listed below, to promote the concerns and interests of TFGC, DSGC, and NGC? Check those programs below. List "Any Other Program Not Listed."

- | | | | | | |
|---|--|--------------------------------------|---------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Air Quality | <input type="checkbox"/> Garden-related topics | <input type="checkbox"/> Bees | <input type="checkbox"/> Birds | <input type="checkbox"/> Butterflies | <input type="checkbox"/> Conservation |
| <input type="checkbox"/> Design | <input type="checkbox"/> Ecology | <input type="checkbox"/> Environment | <input type="checkbox"/> Energy | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Horticulture |
| <input type="checkbox"/> Landscape | <input type="checkbox"/> Pollinators | <input type="checkbox"/> Recycling | <input type="checkbox"/> Trees | <input type="checkbox"/> Water | <input type="checkbox"/> Wildlife |
| <input type="checkbox"/> Any Other Program Not Listed _____ | | | | | (5 pts each) Total _____ |

4. Does your club present Horticulture Specimens, properly named for educational purposes, and/or Floral Designs to at least 6 or more meetings?
 YES NO (10 pts) _____

5. Did you or representatives of your club attend any of the below meetings? For additional credits, put number of attendees on each line (no names required).

- | | | |
|---|--|---|
| <input type="checkbox"/> _____ District Spring Meeting | <input type="checkbox"/> _____ District Fall Meeting | <input type="checkbox"/> _____ President's Meeting |
| <input type="checkbox"/> _____ Flower Show School | <input type="checkbox"/> _____ Symposium | <input type="checkbox"/> _____ Conservation Camo |
| <input type="checkbox"/> _____ State Convention | <input type="checkbox"/> _____ Deep South Convention | <input type="checkbox"/> _____ National Convention |
| <input type="checkbox"/> _____ Garden School | <input type="checkbox"/> _____ Landscape Design School | <input type="checkbox"/> _____ Environmental School |
| <input type="checkbox"/> _____ Any other Gardening/Design Workshop/Course _____ | | |

(2 pts each+ 1 pt additional credit for each attendee, e.g., if 3 attendees = 3 pts) Total _____

6. Did your club have a program about or a visit to an (put the number of attendees on each line):
 ___ Arboretum ___ Botanical Garden ___ Community Garden ___ Historic Site
 ___ State or National Park ___ Wildlife Refuge ___ Educational Center
 Other _____ (10 pts each) Total _____

7. Has your club engaged in any of these community outreaches?
 A Garden Therapy Project Adopted a Spot Supported a Community Garden
 Sponsored a Beautification Project Planted # ___ Trees Supported Historic Preservation
 Observed Arbor Day Observed National Gardening Week
 Sponsored a Neighborhood Program and Invited the Public Supported Legislation
 Engaged in Recycling Sponsored a Youth Club
 Sponsored a Smokey Bear/Woodsy Owl Contestant Purchased *Vision of Beauty* Calendars
 Sponsored a Youth Project/Program/NGC Poetry Contest Entry Subscribed to *Tennessee Conservationist*
 Planted a Pollinator Garden Planted a Park
 Promoted Garden Clubbing with Local Publicity (attach an example) Made Donation to TFGC Headquarters/Racheff
 Volunteered at Ivan Racheff House & Arboretum
 Other Worthy Community Outreach Project Explain _____
 (5 pts each) Total _____

8. Have any of your members given a program to a garden club or other related organization? If yes, could you share the subject and member's name? Would they be willing to present the program to others? YES NO
 _____ (10 pts) _____

9. Do you have members who hold memberships in other organizations, such as plant societies, design groups, master gardeners, flower show judges, rose judges, instructors, etc? Put the number in the box and state organizations on the lines (no names required).
 _____ _____ _____ _____
 _____ _____ _____ _____
 (2 pts each) Total _____

10. Describe any other worthy project or club activity of which you are most proud?

 _____ (20 pts) _____

11. Did your club have an NGC Flower Show (Small Standard, Standard, Horticulture Specialty, or Design Specialty) within the past 2 years? Year of Show _____. For full credit, attach the Flower Show Report Form and only the schedule title page (whole schedule not required). (20 pts) _____

12. Did your members exhibit in a fair, council, district, or a multi-club show, etc? If yes, state show and number of members. (15 pts) _____

Total of all Points _____

New/Incoming Club President Contact Information

Name: _____ Address: _____
 City: _____ State: _____ ZIP + 4 _____
 Home phone: _____ Cell phone: _____ Email: _____

Please include the names of any deceased members for the TFGC Memorial Service.
