

Native Seedling Order Form 2018 / 2019

Name:
Group/Organisation:
Postal Address:
Town/Suburb: State and Postcode:
Ph: (ah) (bh) (Mob)
Email:

Planting Site (if different):
VicRoads State Directory Reference
Name of local Landcare Group:..... Ph #

Do you want your seedlings grown by: TreeProject Volunteers Yourself

Planting Time: Autumn (pick-up June/July 2019) Spring (pick-up August/September 2019)

Planting Purpose: shelter belt wildlife corridor erosion control
 salinity control revegetation other

Planting Site: Farm Bush Block Public Reserve Other

Description of property and project (eg. size, topography, remnants, planting area):
Feel free to attach a map of property / revegetation site

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.....
.....

Approximately how many hectares will your planting site/s be ? ____

Do you want help planting Yes No

List Preferred growers

Declaration

I declare that the seedlings ordered from TreeProject will only be used for long term revegetation purposes

Signed Date

Seedlings Required

Species	Common Name	No. Boxes	Office
If you have more species, please attach an additional list	Total Boxes (must be multiple of 14)		

Minimum order is **500 plants** – which is **14 boxes**, each box containing a single species
 All species ordered must be locally indigenous to the area they will be planted.

Seed

- I have enclosed my seed I will forward my seed

Payment Details

- I have enclosed \$220.00 per 500 seedlings or \$210.00 as a self grower
 I have enclosed _____ per 500 seedlings (business / government)
 TreeProject to organise my seed order for an administration fee of \$35.00 **(seed cost is additional)**
 I would like to become a member of TreeProject
 \$33 individual \$55 couple \$66 family \$66 organisation \$330 business supporter
 \$660 life member I would like to make a tax deductible donation of

Payment Method

- Cheque Money Order Credit Card
 Visa MasterCard Card No _____

Expiry Date __ __ Name on Card: Signature:

- Direct Deposit** TreeProject Working Account **BSB 633000 Account 106600158**
Please put your name in the notes field if not in the Account name

Total Enclosed/Charged:

Send this completed form to: TreeProject - 3rd Floor, 247 Flinders Lane, Melbourne Vic 3000, Fax: (03) 96504385
de.grebner@treeproject.org.au PH (03) 96509477 ABN 90 669 079 400 TreeProject Inc. Reg A0018731Y

Office use only: Date Recept no. Seed