



Registration Form

Name: _____

Organization: _____ Title: _____

Address: _____ City/State: _____ Zip: _____

Work Phone: () _____ Fax Number: () _____

E-mail Address: _____

Registration fee is \$175.00. Please indicate below if you will be attending the Mayor's Preview Night of the 2003 Flower and Garden Show on March 7 at 6:30 p.m.

- Yes, I will attend the Mayor's Preview Night of the 2003 Flower and Garden Show.
- No, I cannot attend the Mayor's Preview Night of the 2003 Flower and Garden Show.

Please make checks payable to the Chicago Urban Horticulture Foundation