



Colorado State University Extension Norwood Lone Cone Library Seed Library

Membership Form

(Please fill out and file in the binder, alphabetically by last name)

Please Read and agree to The Safe Seed Pledge:

Agriculture and seeds provide the basis upon which our lives depend. We must protect this foundation as a

consumers who want an alternative, I promise that I do not knowingly share, or trade genetically engineer						
) seeds with our seed library.					
	rary, I promise to grow plants and save seeds according to best					
	d that will produce plants true to the variety I label them to be.					
Signature:	Date:					
Name:						
Contact information:						
Email:	Phone:					
	w many years and what types of seeds have you saved?)					
Tell us about where you garden:						
Tell us about where you garden:						
Tell us about where you garden: Community/ elevation:	ptional):					
Tell us about where you garden: Community/ elevation: Frost Free Growing Season dates and length (o	ptional):					
Tell us about where you garden: Community/ elevation: Frost Free Growing Season dates and length (o	ptional): r shade, methods, etc.)(Optional)					

Member's Seed Record- Checking out seeds

Date	Plant Name and Variety	Seed Source	Year of Harvest	Notes
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Thank you for your interest in saving seeds.