



(ORGANIZATION NAME)
SPRING FUNDRAISING PROGRAM
INDIVIDUAL ORDER FORM

Customer Name _____

Address _____

Phone Number(s) _____

Covington's Nursery is growing beautiful spring flowers and teaming up with the community to help schools, organizations and non-profit groups in their fundraising efforts.

Please complete all information legibly so we can fill your order accurately.

The delivery date for flowers will be _____ **at** _____.

(Date/Time) (Location)

| Description | Number of 20-Count Flats | Flat Price | Total Due |
|-------------------------------------|-----------------------------|------------|-----------|
| Profusion Zinnia Mix Flats | | | |
| Begonia Bronzeleaf Mix Flats | | | |
| Begonia Bronzeleaf Red Flats | | | |
| Begonia Bronzeleaf Pink Flats | | | |
| Begonia Bronzeleaf White Flats | | | |
| Moss Rose Mix Flats | | | |
| Penta Mix Flats | | | |
| Begonia Greenleaf Mix Flats | | | |
| Begonia Greenleaf Red Flats | | | |
| Begonia Greenleaf Pink Flats | | | |
| Begonia Greenleaf White Flats | | | |
| Impatiens Mix Flats | | | |
| Impatiens Lilac Flats | | | |
| Impatiens Red Flats | | | |
| Impatiens Lipstick (Hot Pink) Flats | | | |
| Impatiens Orange Flats | | | |
| Impatiens White Flats | | | |
| TOTALS | | | \$ |