

Wildlife Food Plot Application

Name: _____

Parent(s) Name: _____

Mailing Address: _____

Address City State Zip

Age: _____ Phone: _____

School: _____

County: _____

Directions to Food Plot (Attach Map) _____

Project Size: _____ Planting Date: _____

Seed Types & Rates (list) _____

Seed Bed Preparation (brief narrative) _____

Project Description (brief narrative) _____

Mail completed application to:

**Three Rivers SWCD
P.O. Box 815
Tappahannock, VA 22560**

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