Plant Information Request

Name: ___________________________________________ Date: __________________________

Email: ___________________________________________ Phone: __________________________

What would you like to know? _______________________________________________________

________________________________________________________________________________

[Use back of form if more space needed.]

RETURN FORM TO: Olbrich Botanical Gardens - Schumacher Library, 3330 Atwood Avenue, Madison, WI 53704

Email Plant Information Request to: olbrichplantinfo@cityofmadison.com

FOR OFFICE USE ONLY – [Please print.]

Follow up Action Taken:  □ emailed   OR  □ called/voice message
    □ Requested More Information from Patron on: ____________________________ Date

Answer Provided to Patron: [Please describe – use back of, form, if needed.]

Date Response Completed: ________________ Completed By: ________________________________