

# Plant Conservation Resources Order Form

**Send to: Plant Orders—CREW**  
**Cincinnati Zoo and Botanical Garden**  
**3400 Vine Street**  
**Cincinnati, Ohio 45220**  
**Or Fax: (513) 569-8213**

**Proceeds from these sales support CREW's**  
**Endangered Plant Signature Project and the**  
**African Violet Conservation Fund**

Please allow 3 weeks for delivery.  
 Inquire for international orders.

Questions: [testtubeplants@cincinnati-zoo.org](mailto:testtubeplants@cincinnati-zoo.org)

## TEST TUBE PLANTS

<b>NEW –Sensitive Plant</b>	_____	plants @	\$6.00 each =	_____
African Violet	_____	plants @	\$6.00 each =	_____
Boston Fern	_____	plants @	\$6.00 each =	_____
Cape Sundew	_____	plants @	\$6.00 each =	_____
Gloxinia	_____	plants @	\$6.00 each =	_____
Grapevine	_____	plants @	\$6.00 each =	_____
Christmas Cactus	_____	plants @	\$6.00 each =	_____
Staghorn Fern	_____	plants @	\$6.00 each =	_____
Hosta	_____	plants @	\$6.00 each =	_____
Venus Flytrap	_____	plants @	\$6.00 each =	_____
Shipping and Handling			\$4.50 for 1-3 plants	
			(inquire for larger orders)	

## EDUCATIONAL RESOURCES

### Junior Plant Scientist

<b>Seed Survivor! Module</b>	_____	Modules @	\$10.00 each =	_____
		Shipping and Handling	\$2.00 each =	_____
<b>NEW—Explorer! Kit</b>	_____	Kits @	\$70.00 each =	_____
		Shipping and Handling	\$9.00 each =	_____

### Advanced Jr Plant Scientist

<b>In Vitro Collecting Kit</b>	_____	Kits @	\$70.00 each =	_____
		Shipping and Handling	\$9.00 each =	_____

## AFRICAN VIOLET CONSERVATION FUND

*I would like to donate to the African Violet Conservation Fund:*  
 (receive free booklet with donation of \$10 or more)

**TOTAL ITEMS:**  **Note: All taxes included** **TOTAL:**

**Total Enclosed:** \$ \_\_\_\_\_

*Thank you for your support!*

\_\_\_ Check or money order enclosed (made payable to Cincinnati Zoo and Botanical Garden/CREW)  
 \_\_\_ Visa/Master Card payment

Card number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Signature \_\_\_\_\_

Address:  
 Name: \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone or email: \_\_\_\_\_

Shipping Address, if different:  
 Name: \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone or email: \_\_\_\_\_