

... working toward healthy lawns and healthy waters in Fairfax County

Enrollment Form

Name _____
 Address _____
 City _____ Zip _____ Yes, I am a resident of Fairfax County _____
 Day Phone _____ Evening Phone _____ E-mail _____
 (please print legibly)

Soil Samples

The soil probe will go down about 6" deep. Are there any areas in your yard that should not be probed for the soil sample due to underground wires, etc.? _____

Some things can alter soil test results, such as ashes from wood burning stoves or dog waste. Do you have any areas in your lawn we should avoid sampling? _____

Do you keep pets outside while you are not at home? Yes _____ No _____

Last lime application (months previous): _____ Pounds per 1,000 sq. ft.
 0-6 _____ 7-12 _____ 13-18 _____ 19+ _____ Not Sure _____ N/A _____
 0 _____ 10-50 _____ 51-100 _____ 101-150 _____ 151+ _____

Soil Sample Guidelines

Lawns of 10,000 sq ft or less require only one composite soil sample for all areas within the lawn. It is **optional** to have additional soil tests for different areas of your lawn if it is larger than 10,000 sq ft, or you manage areas differently. If you would like any additional soil samples (limit two additional tests), please indicate which areas you want sampled:

Front _____ Back _____ Side _____ Other _____

► **PLEASE NOTE: OUR \$25 FEE INCLUDES 1 SOIL TEST. ADDITIONAL SOIL TESTS COST \$15 EACH** ◀

Number of Soil Samples Requested: 1 (Basic Program, send \$25) _____ 2 (\$40) _____ 3 (\$55) _____

Paper Reduction

Would you like your personalized lime and fertilizer plan to be sent as an attachment via email? Yes _____ No _____

Authorization

I want to join the Home Turf **keep it simple + keep it green** program. As a participant of the program, I give my permission to Fairfax County Master Gardeners to come onto my property to take soil samples and lawn measurements. I understand that the base fee (\$25) covers one soil test and program materials. Any additional soil tests are \$15 each. Enclosed is a check for program fees.

Signature (required) _____ Date _____

Please make your check payable to "Fairfax County Master Gardeners". Mail your check and this Enrollment Form and Survey to:

Home Turf keep it simple + keep it green Program
Fairfax County Extension Office
12011 Government Center Pkwy
10th Floor
Fairfax, VA 22035-1111

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OPTIONAL - Demographics:

Virginia Cooperative Extension Programs are open to all. Please help us measure our effectiveness at reaching all people by voluntarily completing the information here.

GENDER (select one)		ETHNICITY (select one)		RACE (select one or more)				AGE (select one)			
Female	Male	Non-Hispanic or Latino	Hispanic or Latino	American Indian or Alaskan Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	≤ 18	19 - 64	≥ 65

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Survey

To help us understand more about your lawn and provide information for your situation, please complete this survey and include it with your enrollment form and check. If your response to some questions is "don't know", that's fine – we appreciate the information you're providing. *Thank You!*

1. Your Lawn

How old is your lawn? _____ (If unsure, what year was the house built? _____)

What type of grass do you have?

cool season (e.g. Kentucky bluegrass, tall fescue, perennial ryegrass, fine fescue) _____

warm season (e.g. Bermudagrass, zoysiagrass, centipedegrass) _____

don't know _____

What is your lawn area in square feet? _____ sq ft don't know _____

Do you aerate your lawn annually? yes _____ no _____ don't know _____

Do you over-seed your lawn? yes _____ no _____ don't know _____

If yes, how often? _____

Do you employ a lawn service? yes _____ no _____

Rate the appearance of your lawn: poor _____ fair _____ good _____ excellent _____

2. Problems (mark all that apply)

() clay soil () compacted soil () steep slope () poor drainage () drought

() shade () weeds () wiregrass () grubs () thin turf () brown patch () moss

() other - please explain _____

3. Fertilizer application

Has your lawn been fertilized in the last 12 months? yes _____ no _____ don't know _____

Check each month that you fertilize:

January ___ February ___ March ___ April ___ May ___ June ___

July ___ August ___ September ___ October ___ November ___ December ___

Do you know how much fertilizer was applied during the last 12 months? yes _____ no _____

If yes, what were the Nitrogen-Phosphorus-Potassium (N-P-K) numbers on the bag? (e.g. 29-3-4)

N-P-K _____ number of bags _____ weight per bag _____ don't know _____

4. Irrigation / Watering

Do you water your lawn? yes _____ no _____ If yes, how many times per week? _____

Do you have an irrigation (sprinkler) system installed in your lawn? yes _____ no _____

5. Past soil testing

Have you had your soil tested within the last 3 years? yes _____ no _____ don't know _____

If yes, when? _____

6. Mowing

I mow my grass to a height of: more than 3" _____ 2-3" _____ less than 2" _____ don't know _____

Do you remove grass clippings from the lawn? yes _____ no _____

If yes, do you: compost clippings _____ throw clippings in the trash _____ other _____

How often are the mower blades sharpened? _____

7. And finally...

What is the best way for us to contact you? email _____ telephone _____ (please print both legibly on enrollment)

How did you hear about this program? _____