



# American Hemerocallis Society

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## FINAL REPORT FOR ACCREDITATION OF DAYLILY SHOW

This final report is due within two weeks after your show. Send one (1) copy to the AHS Exhibitions Chairman (address above) and keep one (1) copy for your files. Please enclose the Exhibition Judges Best-in-Show Ballots, the Best-in-Show Tabulation form or a printed *AHS Tabulation Program* report with this final report (or e-mail the electronic tabulation program file). The show is not fully accredited until the Exhibitions Chair or its Committee has verified the report and tabulation results.

Sponsoring Organization \_\_\_\_\_ Region \_\_\_\_\_

Show Date \_\_\_\_\_ Location \_\_\_\_\_

Place \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Number of AHS members in sponsoring organization \_\_\_\_\_ Number non-members \_\_\_\_\_ Total members \_\_\_\_\_

Show Attendance \_\_\_\_\_ Number of new AHS members who joined at show \_\_\_\_\_ Total no. scapes competing \_\_\_\_\_

Show Chairman \_\_\_\_\_ Co-chairman \_\_\_\_\_

### HORTICULTURE DIVISION

When listing names of exhibitors who win AHS rosettes, please list names as they appear in the official AHS membership directory. If exhibitors are from other regions, list their home region number on line with their names. AHS Best-in-Section Rosettes were awarded to the following: **Note: When 'youth' wins other than section 8, annotate 'Y' beside the exhibitor's name.**

Section	Cultivar/Seedling	Hybridizer	Year Registered (required)	Exhibitor
1. Extra Large	_____	_____	_____	_____
2. Large	_____	_____	_____	_____
3. Small	_____	_____	_____	_____
4. Miniature	_____	_____	_____	_____
5. Double, Multiform, and Polymerous Flowers	_____	_____	_____	_____
6. Spider	_____	_____	_____	_____
7. Unusual Form	_____	_____	_____	_____
8. Youth	_____	_____	_____	_____
9. Pop. Poll	_____	_____	_____	_____
10. Seedling	_____	_____	_____	_____

**Be sure to give the hybridizer and year of registration for each cultivar as listed in the AHS Checklist. For Section 10, give hybridizer's seedling number if available, hybridizer's name, and exhibitor if different from hybridizer. Verify spelling.**

**Winning cultivar or seedling of Best-in-Show**

**Rosette:** \_\_\_\_\_

**Winner of Sweepstakes Rosette:** \_\_\_\_\_

**Winner(s) of AHS Achievement Medal:** Medals will not be sent until the Exhibitions Chair or Exhibitions Committee has verified the Achievement Medal tabulation and has received notice of official registration from the hybridizer. Medals are provided by AHS but the responsibility of engraving is assumed by the local show committee. Medals will be sent directly to the local Show Chairman.

1. Has registration of the winning cultivar been completed through AHS Registrar? Y\_\_\_ N\_\_\_
2. What is the name of the winning cultivar(s)? \_\_\_\_\_
3. Hybridizer’s name, address, city, state, zip & region \_\_\_\_\_  
\_\_\_\_\_
4. List names of the three judges who judged this section \_\_\_\_\_  
\_\_\_\_\_

**Winner(s) of Ophelia Taylor Horticultural Award:** After verification of the OTH Award tabulation by the AHS Exhibitions Chair or Exhibitions Committee, the AHS Exhibitions Chair will send the award (a pin) to be presented at the AHS National Convention.

Winner(s) name, address, city, state, zip & region \_\_\_\_\_  
\_\_\_\_\_

**Winner(s) of Award of Appreciation.**

Type of exhibit \_\_\_\_\_  
Number of exhibits entered \_\_\_\_\_  
Exhibitor’s name \_\_\_\_\_

**DESIGN DIVISION**

**Winner of Tricolor Award:**

Class \_\_\_\_\_ No. of classes competing \_\_\_\_\_  
Exhibitor’s name, address, city, state, zip & region \_\_\_\_\_

Is Tricolor winner an AHS member? Y\_\_\_ N\_\_\_ New member this year? Y\_\_\_ N\_\_\_  
Will a digital image or color photo/slide of the design be sent to the AHS Exhibitions chair (necessary for national judging) in order to be entered in national AHS Tricolor Medal Contest? Y\_\_\_ N\_\_\_

**Winner of Designer’s Choice Award:**

Class \_\_\_\_\_ No. of classes competing \_\_\_\_\_  
Exhibitor’s name \_\_\_\_\_

**Does your sponsoring organization plan to have an accredited show next year? Y\_\_\_ N\_\_\_**

*Please send a detailed report of your show to your AHS Regional Vice President or Editor for possible use in your regional newsletter.*

