

## Jumping Worm Certification

Project Name or event: \_\_\_\_\_

Project lead: \_\_\_\_\_

I confirm that I understand the process of looking for Jumping Worms and what to do if found. If any questions, please reach out to the Jumping Worm Committee, Plant Health Advisors or the Extension Advisor.

My soil tested positive for Jumping Worms. I understand that I CANNOT donate to any Master Gardener events.

I did not find any signs of Jumping Worms in the soil, from which I plan to do digs\*. I understand, that I cannot donate any digs from soil that has not been tested. If you donate from more than one location in your yard, ALL locations must be tested.

I understand that all digs by me will be rinsed and sprayed free of any soil and potted using bagged potting soil mix or after washing off the roots, you can place it in a plastic bag or bucket of water no longer than overnight.

I understand that all soil testing and certification must be completed and submitted by Oct 31<sup>st</sup> of this year to donate flowers for the spring of next year. Donations for fall planting must be completed by July 31<sup>st</sup> of the same year.

\*Digs include plants, bulbs and anything else removed from the soil.

By completing the information above you are certifying that you understand the process of identifying Jumping Worms and if found how to properly dispose of them. You acknowledge that any plants or bulbs you donate will be free of Jumping Worms to the best of your knowledge. I understand that if jumping worms are found I cannot donate.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_