

ORMOND NURSERIES

148 Rowley Crescent,

Grovetown, Blenheim

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Customer Order Form

Business Name: _____

Contact Name: _____

Address: _____

Telephone _____

Fax _____

Mobile _____

Email: _____

I wish to Order the following grape plants: -

Budwood Variety	Rootstock Variety	Quantity	Year

Date _____
