

APPLICATION FOR NODULE-FORMING BACTERIA.

I desire to conduct an experiment with nodule-forming bacteria for :—
Alfalfa or Lucerne, Red Clover, Alsike Clover, White Clover, Vetches,
Peas, Field Beans (Strike out those not wanted.)

Pounds or bushels of seed to be inoculated.

(Each bottle is sufficient for 60 pounds of seed).

Probable date of seeding.

If the culture is sent to me, I will—

1. Carry on the experiment according to the instructions received.
2. Exercise care and accuracy in the work.
3. Report the results of the experiment soon after harvest, whether successful or not.

Name..... Post Office.....

County Province

Enclosed find..... cents to pay for culture.

This sheet when filled out should be addressed in a sealed envelope to
the *Bacteriological Laboratory, Agricultural College, Guelph, Canada.*

In order to avoid annoying mistakes and delays, write plainly in filling
out the application.

NOTE—This application form can be detached along the perforated line.

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