

2006-07 Canada Western Hard White Spring wheat Master Grower entry form

Date		
Name		
First name		Last name
Farm name		
CWB permit book number		
P.O. box or street and number		
City/town	Prov	Postal code
Phone Day (Evening ()	Fax_()
E-mail		
Sample collection		
Fill sample envelope with reprPlease ensure that the envel	esentative sample of at least 300g o ope is adequately sealed. r by courier (COD and postage due p	

- The CWB is not responsible for lost, delayed or misdirected samples.
- Samples must be received by Friday, September 29, 2006.
- All judges' decisions are final.

Seeding information

What variety of CWHWS did you grow?	
Why did you select this white wheat variety?	
Please list other spring wheat varieties grown this year	
Do you use certified seed regularly? \Box yes \Box no	
If so, why?	
What was your seeding date?	
What seeding rate did you use?	
What was your seeding depth?	
Was your CWHWS grown on \Box summerfallow \Box stubble \Box dryland \Box irrigation	
What was the previous crop?	
What is your typical crop rotation sequence?	
How many years have you been growing CWHWS?	
	(Over)

By what date do you normally plan to seed spring wheat?
Describe your tillage system: \Box conventional \Box minimum till/direct seeding \Box zero till
For direct seeding indicate: \Box high disturbance \Box low disturbance
Fertilizer management
Do you soil test? 🛛 yes 🔹 no
If so, how closely do you follow the recommendations: \Box closely \Box as a guide \Box not at all
How much fertilizer did you apply? (lb/acre) N P K S other
Please specify blend:
When did you apply the fertilizer? \Box fall \Box spring prior to seeding \Box at seeding
How do you apply the fertilizer? (Check all that apply)
\Box mid-row shank \Box single shoot \Box double shoot \Box sideband \Box paired row \Box broadcast
□ banded □ other (Please describe)
Pest management
Did you apply herbicides for weed control \Box yes \Box no
If yes, please list the product(s)
Did you apply fungicides for disease control \Box yes \Box no
If yes, please list the product(s)
Did you apply insecticides for insect control \Box yes \Box no
If yes, please list the product(s)
Harvest management
When did you harvest the field from which your sample was taken?
Was it: Swathed Swathing date
Did you apply a pre-harvest dessicant? \Box yes \Box no
If yes, please list the product used
What was the average yield for all your 2006 CWHWS (bushels per acre)
Why did you select this sample? What made it special?
Thank you.

Enclose this form inside your sample envelope and return to the Canadian Wheat Board. Mail your envelope to: P.O. Box 816, Station Main Winnipeg, MB R3C 2P5