
CONTRIBUTION

Full Name:

Enter the full name

Contribution Content:

Enter your contribution

FLOWER PURCHASE REGISTRATION

Please fill in all required information to receive your favorite flowers or ornamental plants.

Full name: (*)

Address: (*)

Phone: (*)

Email:

Flower:

Rose

Red

Quantity: (*)

Unit:

☐ Branch ☐ Pot

Payment:

☐ Cash ☐ Bank Transfer ☐ MasterCard

Notes:

Submit

Reset

LOGIN

Username:

Password:

REGISTER ACCOUNT

Enter username

Enter password

Enter email address

Date of birth **Gender**

Hobbies

☐ Watching movies

☐ Listening a music

☐ Reading books

☐ Travelling

Introduce yourself

REGISTRATION FORM

Full Name: (*)

Address:

Email: (*)

Gender: ☐ Male ☐ Female

Age: (*)

Hobbies: ☐ Sports
☐ Literature
☐ Information Technology
☐ History
☐ Games

Major:

Upload image: No file chosen

Request:

FEEDBACK SURVEY FORM

Username:

Gender:
☐ Male ☐ Female

Topics you often care about on the Internet:
☐ News
☐ Entertainment
☐ Learning Corner
☐ Education
☐ Other Topics

A	B	C
D	E	F

A	B	C
D	E	F

A	B	C
D	E	F

A	B	C
D	E	F

A	B	C
D	E	F