North Okanagan Spring Show Entry Form

EXHIBITOR'S NAME: _____ **PREFIX:** _____

ADDRESS: _____ **CITY:** _____ **P.C.** _____

EMAIL ADDRESS: _____

PHONE NUMBER: (_____) _____ **Deadline for Entries: March 27, 2015**

FAX NUMBER: (_____) _____

CLASS #	NAME OF ANIMAL	BIRTH DATE (mm/dd/yy)	REGISTRATION NUMBER	ANIMAL'S BCA'S optional	ENTRY FEE $15.00

CHEQUES MUST ACCOMPANY ENTRIES **Total** $_____

Entries received after March 27th: $25.00

SEND ENTRIES TO: Kirsty McAvoy
4931 Parkinson Rd
Armstrong, BC V0E 1B4

Fax: 250-260-5774
Email: kirsty.mcavoy@nbpcd.com

Please make cheques payable to:
NORTH OKANAGAN HOLSTEIN CLUB