

North Okanagan Spring Show Entry Form

EXHIBITOR'S NAME: _____

PREFIX: _____

BREED: _____

ADDRESS: _____

CITY: _____ P.C. _____

EMAIL ADDRESS: _____

Deadline for Entries: March 25, 2016

PHONE NUMBER: (____) _____

FAX NUMBER: (____) _____

CLASS #	NAME OF ANIMAL	BIRTH DATE (mm/dd/yy)	REGISTRATION NUMBER	ANIMAL'S BCA'S optional	ENTRY FEE \$20.00

CHEQUES MUST ACCOMPANY ENTRIES
Entries received after March 25th: \$40.00

Total \$ _____

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

**Please make cheques payable to:
 NORTH OKANAGAN HOLSTEIN CLUB**

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