







Last Name	First Name	Mailing Address	City	Prov.	Postal C.	Phone #:	Birthdate	J/I/S*	Mrkt.	Ewe	Yrl. Ewe	Ewe w/ Lamb	Entry Fee
CCIA #:	Sire Breed	Dam Breed	Original Owner			Date of Purchase	Date of Birth	Tattoo	√	√	√	√	\$
34													
35													
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44													
<b>TOTALS</b>													

**\*\*\*ONLY ONE CLUB CHEQUE WILL BE ACCEPTED\*\*\***

Please make cheques payable to: Kamloops Exhibition Association

\*Junior- 9-11, Intermediate- 12-14, Senior- 15 and over

**Leader's Signature:** \_\_\_\_\_