NEW ZEALAND DAIRY GOAT BREEDERS ASSOCIATION INC

SHOW ENTRY RECORDS

Exhibitor _____

Show Season _____

Name of Entry	Reg. Number	D.O.B	Tattoo Left Ear	Tattoo Right Ear	Name of Sire		Reg. Number
					Prefix	Goat Name	

PLEASE SEND A COMPLETED COPY OF THIS FORM TO THE SHOW SECRETARY BY 31 JANUARY:

Carol Plumpton
209 Mangakura Road, R D 2
Helensville 0875

Ph: 09 420 6173
Fax: 09 420 6173
Email: plumpton@ihug.co.nz

THE DETAILS ON THIS FORM WILL BE USED TO RECORD PLACED ANIMALS FOR NZDGBA RESULTS AND AWARDS

IF THE SHOW SECRETARY DOESN'T HAVE THESE DETAILS, NO POINTS CAN BE AWARDED