**BEEF ENTRY FORM** **WAIRARAPA AGRICULTURAL & PASTORAL SOCIETY INC.**  Beef section C/- Lisa Berthold P.O. Box 176 Carterton 5743

Mobile 0278 333 000 Email [lisa@woollymanormoos.co.nz](mailto:lisa@woollymanormoos.co.nz)

The Wairarapa A&P take our Biosecurity and Ospri Compliance seriously. ALL CATTLE must be Nait Compliant and have a current TB Test. Please ensure that you have read our rules in our schedule, if you have any questions, please contact Lisa Holloway on 0278 333 000.

**SHOW ENTRIES:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CLASS** | **ENTRY NAME:**  **Herdbook Registration number:** | **Date of Birth** | **RFID** | **SIRE** | **DAM** | | **EXHIBITOR** | **Highland Passport** | | **ENTRY FEE $** |
| *6205* | *Loki Woollymoo of Te Mere*  *Herdbook Reg: NZLH1736* | *01.12.17* | *951 000308476251* | *Eadon Pollok* | *Alice of Te Mere* | | *Woolly Manor Moos* | *679* | | *$10.00* |
|  |  |  |  |  |  | |  |  | |  |
|  |  |  |  |  |  | |  |  | |  |
|  |  |  |  |  |  | |  |  | |  |
|  |  |  |  |  |  | |  |  | |  |
|  |  |  |  |  |  | |  |  | |  |
| **Catalogue** | | | **$ 5.00** | |
| **Total Fees** | | | **$** | |

**Please Deposit total Fees by Direct Credit to Bank Account Number 02 0608 0018129 000**

**Exhibitor Name: ....................................................................................... Contact Phone number: .....................................................................................................**

**Email Address: .........................................................................................**

**I Declare that all the conditions as printed in the schedule have been complied with for cattle entered in this show**

**Signed: ..................................................................................................... Please bring your AHB form and copies of your Nait Transfers with you for collection**