BEGA A.P.& H. Society

Exhibitors Form- Poultry

Exhibitors Code [Office Use only]_____

Exhibitor's Name:_____ [1 exhibitor only per form]

Address:_____

Phone:_____

Email:_____

Section	Class	Description

A copy of this Entry Form will be your authority to collect exhibits.

I agree to abide by the Rules & Regulations contained in the Show Schedule, and certify that the above exhibits are the work of the exhibitor.

Signed_____ Dated_____

[Typed signature accepted on emailed copies]