

2008 ABR GWAS Spin-Off

(AOBA Certification Pending)
Handcrafters' Spin-Off Entry Tag

Entry Number

Placing

BREED (Circle One): **H (or) S**

Age Division (Circle One): **A B C D or E**

Color Designation (Circle One): **WH, BG, LF, MF, DF, LB, MB, DB, BB, TB, LRG, MRG, DRG, LSG, MSG, DSG, PN, PT, FN, AP, IL, ID**

Alpaca's Date of Birth: MM DD YY
____/____/____

Date of this Shearing: ____/____/____

Date of last Shearing: ____/____/____

Growth Time (between Shearings):

_____ Months _____ Days

Alpaca's Age (at time of THIS Shearing): _____ Months

-----Show Management to Cut Here-----

Exhibitor Information

ARI Reg. #: _____ Entry Number

Alpaca Name: _____

Farm: _____

Address: _____

CHECK ONE:

I have enclosed postage to have my sample mailed back to me.

I will pick up my sample at the show.

I have authorized the following person (Please Print Name):
to pick up my sample at the show.

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