**WELSH MULTI BREED PEDIGREE BEEF CALF SHOW**

**ENTRIES CLOSE**

**18TH NOVEMBER 2024**

**ENTRY FEE**

**£5.00**

**CHEQUE PAYMENT**

**WMBCS**

**BACS PAYMENT**

**ACCOUNT 29066060**

**SORT CODE 30-99-50**

PLEASE RETURN COMPLETED FORMS

ANWEN THOMAS

MAES Y TAFARN

EFAILWEN

CLUNDERWEN

CARMS

SA66 7XA

TEL: 01994 419719 / 07999792402

EMAIL: premierpolledherefords@gmail.com

SATURDAY 7TH DECEMBER 2024

CARMARTHEN MART HOLDING NUMBER 55/020/8001

**ENTRY FORM**

 NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DISCLAIMER OF LIABILITY**

THE WELSH MULTI BREED CALF CLUB WILL NOT BE HELD RESPONSIBLE FOR ANY LOSS, THEFT OR INJURY TO ANY PERSONNEL OR ANIMALS DURING THIS EVENT.

PLEASE BE AWARE THAT NAMES, ADDRESSES AND DETAILS OF ENTRIES WILL BE PUBLISHED IN THE CATALOGUE OF ENTRIES.

I HAVE NOTED THE DISCLAIMER CLAUSE. **SIGNATURE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FRIDAY NIGHT FACILITIES PLEASE CIRCLE YES NO**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **CLASS** | **ANIMAL NAME** | **EAR TAG NUMBER** | **SEX** | **DATE OF BIRTH** | **BREED** | **ENTRY** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**PLEASE USE ADDITIONAL FORMS IF REQUIRED**

**TOTAL FEE**