

LOWICK & DISTRICT AGRICULTURAL SOCIETY

REGISTER OF HANDLERS & ATTENDANTS

To be present in livestock section at the show on Saturday, 4th September, 2010

PLEASE USE A SEPARATE LINE FOR EACH PERSON (WRITE IN BLOCK LETTERS PLEASE)

FULL NAME	FULL ADDRESS	TELEPHONE NUMBER	TYPE OF CONTACT WITH ANIMALS (e.g. FARMER/HAULIER etc.)

Please state registration number of vehicle that will be used to transport animals to the show

Vehicle Registration No:

Owners please fill in the following and sign to confirm that the information given is correct and that all Rules regarding movement licensing and biosecurity have and will be adhered to.

Owner's Name: **Title:** (Mr / Mrs / Miss / other)

Address:

.....

Tel No: **Date:** **Signature:**