

Holstein Foundation

Junior DairyBowl Entry

All teams must designate a team captain and coach. The coach should be recognized by the state association. Entry forms must be postmarked by **April 1st**.

STATE _____ *TEAM CAPTAIN* _____

TEAM COACH:

Name _____

Address _____

Telephone Number _____

TEAM MEMBERS:

Name _____

Name of Parents _____

Address _____

Birth Date _____

Telephone Number _____

Name _____

Name of Parents _____

Address _____

Birth Date _____

Telephone Number _____

Name _____

Name of Parents _____

Address _____

Birth Date _____

Telephone Number _____

Name _____

Name of Parents _____

Address _____

Birth Date _____ Telephone Number _____

ALTERNATES:

Name _____

Name of Parents _____

Address _____

Birth Date _____ Telephone Number _____

Name _____

Name of Parents _____

Address _____

Birth Date _____ Telephone Number _____

Dairy Bowl entries must be forwarded to:
Holstein Foundation
ATTN: Kelli F. Dunklee
P.O. Box 816, Brattleboro, VT 05302-0816