

Registration Form for NYS Jr. Holstein Speech Contests

No limit on number of participants from each County.

Please fill out two entries (one for each contest) if doing both Extemporaneous and Prepared.

RETURN TO: New York Holstein Assn., 957 Mitchell Street, Ithaca, New York 14850

Postmark Jan. 4, 2014 or email Stacie at ssherman@nyholsteins.com

Name: _____ Age as of 1/1/2014 _____
Birthdate: _____ County: _____ Phone: (____) _____
Address: _____
 Novice (Prepared only) Junior Intermediate Senior
 Prepared Extemporaneous Contest

Name: _____ Age as of 1/1/2014 _____
Birthdate: _____ County: _____ Phone: (____) _____
Address: _____
 Novice (Prepared only) Junior Intermediate Senior
 Prepared Extemporaneous Contest

Name: _____ Age as of 1/1/2014 _____
Birthdate: _____ County: _____ Phone: (____) _____
Address: _____
 Novice (Prepared only) Junior Intermediate Senior
 Prepared Extemporaneous Contest

Name: _____ Age as of 1/1/2014 _____
Birthdate: _____ County: _____ Phone: (____) _____
Address: _____
 Novice (Prepared only) Junior Intermediate Senior
 Prepared Extemporaneous Contest

*****Make as many copies of this registration form as needed.**

***** Be sure to include medical release.**