



ALBERTA ANGUS

4-H Beef Project Award Application Form

4-H Club _____

Leader/Contact _____

Address _____

Town/Postal Code _____

Phone _____

Email _____

Awards Date _____

4-H Region _____

4-H Members showing Angus influenced animal:

Name	Email	Beef Project (Check all that apply)			
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
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		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
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		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf
		<input type="checkbox"/> Steer	<input type="checkbox"/> Yearling	<input type="checkbox"/> 2 yr old cow/calf	<input type="checkbox"/> 3 yr old cow/calf

Please return form to Alberta Angus Association via mail (Box 3725, Olds, AB T4H 1P5), fax (403-556-3333) or email (office@albertaangus.ca) by April 30.