2017 OHIO 4-H AVIAN BOWL CONTEST - Contest Date - August 5

Team Entry Postmark Deadline: July 7, 2017

Entry Fee: \$15.00 per team Questions and Entry Fee MUST accompany this Form! This Form May be Duplicated

County			Coach Name(s)
Senior Division (14 & older as of 1/1)			Address
Junior Division (13 & under as of 1/1)			
			Phone
			Email
CO	NTEST	<u>ANTS</u>	
1:	Nam	e	Birth date
	Addr	ess	4-H age (1/1)
2:	Nam	e	Birth date
	Addr	ess	4-H age (1/1)
3:	Nam		Birth date
J.			4-H age (1/1)
4:	Nam		Rirth date
٦.			Birth date4-H age (1/1)
ALT	ERNAT	 'E	
	Nam	e	Birth date
	Addr	ess	4-H age (1/1)
(1) A	respon	contestant must be replaced by an sible for bringing the replacement of SIGNED BY COUNTY 4-H lvisor, I verify the 4-H member(s) are in goo	ut for each contestant and one alternate*** other contestant not listed on this form, the coach is ontestant's information ON A REVISED ENTRY FORM PROFESSIONAL to registration*** d standing in the club(s) and are each enrolled in 4-H. (2) As the
men	nbers/co	aches become the sole property of the Ohi	er(s) in good standing in the county. Any photographs taken of 4-H of 4-H Program. Such photographs may be used at the Program's om members/advisors/parents or guardians.
Advisor(s)			Date
Exte	ension F	Professional	Date
Mail to: 4-H Avian Bowl Contest		4-H Avian Bowl Contest	Make Checks Payable to: The Ohio State University

Lucinda Miller, Extension Specialist, 4-H

2201 Fred Taylor Dr., Room 310 Columbus, Ohio 43210

Checks MUST accompany team entries!

Entries MUST BE POSTMARKED by Friday, July 7!