



The ANDDA Total Performer Program ENTRY FORM

Animal's registered name: _____

Reg. #: _____ DOB: _____ Tattoo: _____ Height: _____

Sire name & #: _____

Dam name & #: _____

Breeder _____

Owner _____

Entry fee - \$5.00 per entry

Please fill out the table below with the information on your **best 3 shows** of the year.

<p>SHOW #1</p> <p>AGS Sanctioned [] ADGA Sanctioned [] Show Date []/[]/[09]</p> <p>Show Name, Location, City and State : _____</p> <p>Judge : _____</p> <p style="text-align: center;">PLACINGS</p> <p style="text-align: center;">1st [] 2nd [] 3rd []</p> <p style="text-align: center;">GCH [] RGCH [] BOB [] BIS [] BU []</p> <p style="text-align: center;">*****</p>
<p>SHOW #2</p> <p>AGS Sanctioned [] ADGA Sanctioned [] Show Date []/[]/[09]</p> <p>Show Name, Location, City and State : _____</p> <p>Judge : _____</p> <p style="text-align: center;">PLACINGS</p> <p style="text-align: center;">1st [] 2nd [] 3rd []</p> <p style="text-align: center;">GCH [] RGCH [] BOB [] BIS [] BU []</p> <p style="text-align: center;">*****</p>
<p>SHOW #3</p> <p>AGS Sanctioned [] ADGA Sanctioned [] Show Date []/[]/[09]</p> <p>Show Name, Location, City and State : _____</p> <p>Judge : _____</p> <p style="text-align: center;">PLACINGS</p> <p style="text-align: center;">1st [] 2nd [] 3rd []</p> <p style="text-align: center;">GCH [] RGCH [] BOB [] BIS [] BU []</p>

Make sure to Enclose:

- Three photos from the prior year show season. (Side View, Front View and Rear View – In show stance). *Note: Please have copies of photos made before mailing, as **NO PHOTOS WILL BE RETURNED.***
- A copy of the entrant's One Day Milk Test Results that took place in the prior year.
- A copy of the entrant's completed DHI record for the year.
- A copy of the entrant's AGS Classification Scorecard or ADGA Linear Appraisal Record

By signing below I do certify to the best of my knowledge that all of the information on the entry forms is correct, none of the images or copies have been altered in any way and that I am the recognized owner of the above-mentioned animal. Should the animal be chosen ANDDA Total Performer, I give permission for the accompanying photos to be used in promoting the ANDDA Total Performer program.

(Optional) I give permission for ANDDA to use the accompanying photos in Association advertising not associated with the ANDDA Total Performer program.

Owner _____
(SIGNATURE) (PRINTED NAME)

Address _____

PHOTOS WILL NOT BE RETURNED.

An entry fee of \$5.00 per doe must accompany the nomination form. Make checks payable to ANDDA (or send a Paypal payment to andda@rocketmail.com – make sure to include the doe(s) name in the description field of the payment)

All entries (and payments) must be postmarked by **March 1.**

ANDDA Total Performer Program
c/o Margie Dykstra, 11395 Meridian Street, Independence OR 97351
-or-
Emailed to: goats@blythmoor.com