

Junior Awards Group Program

Group Name _____ Phone _____

Contact Name _____ Address _____

City _____ State _____ Zip _____

Show Level ***Show Date*** ***Show Name and Location (City & State)***

____ County _____ _____

____ State _____ _____

**JACKPOTS NOT APPLICABLE*

Description of animal (kind, breed, weight), which won the award _____

Names of the Group Participants: _____

This includes 4-H, FFA, Independent & Grange division Champions and Reserve Champions.

Associated Feed was the only brand of commercial feed fed in this project:

Yes No (if no attach full details of feeding program.)

Dealer Name _____ Phone _____

Dealer Signature _____

Enclosed with this application are:

Dealer verification for feed purchased. (Receipts or signature)

High quality photo for advertising purposes. Photos will not be returned and become Associated Feed property.

Short story describing information about project and explanation of feeding program.

With this application I consent to the use of my name and picture, information about my use of feeds, and my results for advertising and promoting the sale of its various products by Associated Feed and Supply and/ or its dealers, representatives or agents. I agree to participate in no other commercial feed company awards program for the animal specified in this application, doing so will result in forfeiture of the above award and any cost associated with collection of returned award along with advertising cost incurred. I am submitting this within the 60day requirement.

Group Leader Signature: _____ Date _____

Signature of parent or guardian for persons under 18 years of age: _____ Date _____

_____ Date _____