

PLEASE MAIL MEMBERSHIP FORM WITH PAYMENT AND NOMINATION FORM
BY FEBRUARY 19

EAST COAST CATTLE CIRCUIT
1305 MEMORIAL AVENUE
WEST SPRINGFIELD, MA 01089

PLEASE MAKE CHECKS PAYABLE TO: THE BIG EAST

IF YOU HAVE ANY QUESTIONS PLEASE CALL ELENA AT 413-205-5011
OR EMAIL BIGEAST@THEBIGE.COM

(Please detach and mail to the above address)

2018 Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Phone Number: Home (____) ____ - ____ Cell: (____) ____ - ____

Age (as of January 1): _____ Birthdate: _____

Email: _____

Guardian Name (if under 18 years of age): _____

OFFICE USE ONLY

Membership #: _____
Date: _____
Office Staff Initials: _____

IMPORTANT NOTICE & REQUIRED SIGNATURE:

By signing this entry form I certify I have read and understand the rules and regulations of the East Coast Cattle Circuit and agree to abide by them.

Exhibitor Signature: _____

Parent Signature (if under 18 years of age) : _____