

SAFONA Fall Classic Alpaca Show

BREED: H (or) S (circle one)

Entry Number

Placing

Age Division (Circle One): J Y T

Color Group: _____

Alpaca Fleece Show Entry Tag

Alpaca's Date of Birth: MM DD YY
____/____/____

Date of this Shearing: ____/____/____

Date of last Shearing: ____/____/____

Growth Time (between Shearings): _____ Days

Alpaca's Age (at time of THIS Shearing): _____ Months

FLEECE SHOW CLERK MUST COMPLETE

Fleece Weight: Pounds _____ (to 1/10th)

Annual Weight: Pounds _____ (to 1/10th)

-----CUT HERE-----

Exhibitor Information

ARI Reg. #: _____ Entry Number

Alpaca Name: _____

Farm:

Address:

-----CUT HERE-----

PICK UP RECEIPT (Surrender to Fleece Show Clerk)

Fleece Color: _____

Entry Number (Printed Name of Person Collecting Fleece)

Signature (I am the owner, or have been authorized by the owner, to pick up this fleece.)
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