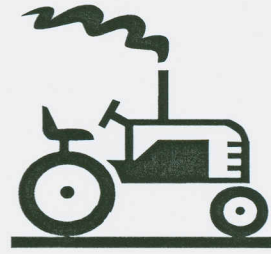


**HOLSTEIN
FOUNDATION
Dairy Jeopardy**



Entry Form

Name _____

Division _____

Names of Parents _____

Address _____

Birth Date _____ **Telephone Number** _____

**1st Alternate
Name** _____

Address _____

Birth Date _____ **Telephone Number** _____

**2nd Alternate
Name** _____

Address _____

Birth Date _____ **Telephone Number** _____

Forward entries by June 1st to:

Holstein Foundation
Kelli Dunklee
P.O. Box 816
Brattleboro, VT 05302-0816
800-952-5200, Ext. 4124