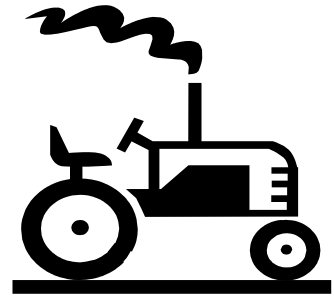


**Holstein Foundation
Ayrshire
Quiz Bowl Contest
Senior Team Entry Form**



*All teams must designate a team captain and coach. Entry forms must be received prior to **June 1st**.*

TEAM NAME _____ **TEAM CAPTAIN** _____

TEAM COACH:

Name _____

Address _____

Phone _____

TEAM MEMBERS:

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

ALTERNATES:

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

Name _____

Name of Parents _____

Address _____

Age _____ **Birth Date** _____ **Phone** _____

Quiz Bowl entries must be forwarded to:

Holstein Foundation
ATTN: Kelli F. Dunklee
P.O. Box 816, Brattleboro, VT 05302-0816

