

# 2020 SPOOK-TACULAR ENTRY FORM (Open Show)

Saturday, November 7th, 2020 12:00PM

OWNER/EXHIBITOR:	FARM NAME:	
ADDRESS:	EMAIL:	
CITY, STATE, ZIP:	HOME PHONE:	CELL PHONE:

CLASS	BIRTH DATE	AGE		SEX	ANIMAL NAME	ID (Ear Tag, Tattoo, etc)	REG #	HANDLER'S NAME (OPTIONAL)	SHOWS	
		YR	MTH						SAT	SUN

\* \* NOTE: Please send a photocopy of your AMZA registration papers with your entries. This will expedite check in. \* \*

**Show Superintendents**  
 Rick Ressler      Cell 352-223-9801  
 Bobbi Thompson    Cell 352-223-5428  
                          Office 352-391-0977  
 Email:            amzaregistrar@gmail.com

ANIMALS ENTERED IN SATURDAY SHOW \_\_\_\_\_ X \$15 \$ \_\_\_\_\_

Make check payable to AMZA  
 Mail entry form & check to:  
 AMZA  
 PO Box 2095  
 Lady Lake, FL 32158

TOTAL ENCLOSED \$ \_\_\_\_\_

