

CYAE EWE NOMINATION

SCRAPIE TAG #

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

Please check below:

SOUTHDOWN _____ DORSET _____ SPECKLE _____ NATURAL _____ CROSSBRED _____

**THIS DNA SAMPLE MUST BE POSTMARKED BY MAY 22ND, AND
THE INFORMATION ENTERED ONLINE ON X-PO BY MAY 22ND**

CYAE OFFICE ADDRESS:

2530 G ST, BAKERSFIELD, CA 93301

CONTACT PHONE NUMBER: _____

SUPERVISOR SIGNATURE: _____

SUPERVISOR NAME (PRINTED): _____

**CYAE MARKET
WETHER NOMINATION**

SCRAPIE TAG #

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

Please check below:

HAIR _____ **SOUTHDOWN** _____ **SHROPSHIRE** _____ **DORSET** _____ **SPECKLE** _____ **NATURAL** _____ **HAMPSHIRE** _____ **SUFFOLK** _____ **CROSSBRED** _____

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CYAE OFFICE ADDRESS:

SUPERVISOR SIGNATURE: _____

2530 G ST, BAKERSFIELD, CA 93301

SUPERVISOR NAME (PRINTED): _____

CYAE MARKET BARROW NOMINATION

LAST 6 DIGITS OF ELECTRONIC 840 NUMBER:

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

Please check below:

BERKSHIRE _____ CHESTER WHITE/LANDRACE _____ DUROC _____ HAMPSHIRE _____ HEREFORD/TAMWORTH _____ POLAND CHINA _____ SPOT _____ YORKSHIRE _____
LIGHT CROSSBRED _____ DARK CROSSBRED _____ ALL BLACK _____

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CONTACT PHONE NUMBER: _____

SUPERVISOR SIGNATURE: _____

SUPERVISOR NAME (PRINTED): _____

CYAE GILT NOMINATION

LAST 6 DIGITS OF ELECTRONIC 840 NUMBER:

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

Please check below:

BERKSHIRE _____ CHESTER WHITE/LANDRACE _____ DUROC _____ HAMPSHIRE _____ HEREFORD/TAMWORTH _____ POLAND CHINA _____ SPOT _____ YORKSHIRE _____
LIGHT CROSSBRED _____ DARK CROSSBRED _____ ALL BLACK _____

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CYAE OFFICE ADDRESS:

2530 G ST, BAKERSFIELD, CA 93301

CONTACT PHONE NUMBER: _____

SUPERVISOR SIGNATURE: _____

SUPERVISOR NAME (PRINTED): _____

CYAE GOAT NOMINATION

SCRAPIE TAG #

Please check below:

DOE _____ WETHER _____

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

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CONTACT PHONE NUMBER: _____

SUPERVISOR SIGNATURE: _____

SUPERVISOR NAME (PRINTED): _____

CYAE CATTLE NOMINATION

LAST 6 DIGITS OF 840 NUMBER:

Exhibitor 1 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 2 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Exhibitor 3 (Sibling): _____

Age (As of 1/1/26): _____

4H/FFA Chapter: _____

Address of Exhibitor(s) _____

City: _____

State: _____

Zip: _____

Please check below:

BRITISH _____ BLACK _____ AOC _____ SLICK SHEAR _____

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