

Entry Form

Tri-County Steer Carcass Futurity

Name _____

Address _____

City, State, Zip _____

Phone _____

Fax _____ Email _____

I plan to enter _____ Steers in the Tri-County Steer Carcass Futurity Program.

I plan to enter _____ Heifers in the Tri-County Steer Carcass Futurity Program.

I have enclosed \$ _____ (\$20 per head) per reservation fee.

Please enroll _____ steer(s)/heifer(s) in the Risk Management group.

If calves were implanted, list brand name and date of implanting:

_____ Please forward an advance of half the value of my values up to \$400 per head to me upon delivery.

Signature

Lenders signature

(if cattle are included on a security agreement)

Please mail entries, along with your check made payable to Tri-County Steer Carcass Futurity Cooperative.

TCSCF
53020 Hitchcock Avenue
Lewis, IA 51544
Phone: 712-769-2600
Fax: 712-769-2610

