

LOWER MAINLAND SHEEP PRODUCERS ASSOCIATION

Bidder information

PLEASE PRINT LEDGIBLY

Date: _____(mm/dd/yy)

BIDDER NUMBER: _____

Name: _____

Address: _____

Home phone: _____ Cell: _____

Email: _____

*** This information is for Fleece Purchase contact ONLY. The LMSPA will not use this for further contact (unless noted below) and will not give or sell your information to ANYONE.***

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I would like to be notified about next years LMSPA Fleece Sale (please place an X in the box)