

APPLICATION FOR 2011 ALR YOUTH AMBASSADOR

Last Name	First Name	Middle Initial	Date of Birth
Address	City	State	Zip
Phone Number	Alternate Phone Number	Email Address	

Emergency Contact Information (Please provide 2)

Name	Name
Address	Address
Phone Numbers	Phone Numbers

Do you have any allergies or physical limitations? Yes No (Circle One)

If yes, please explain. _____

Do you personally own any Lowline Cattle? Yes No (Circle One) If yes, how many? _____

How long have you owned or been involved with Lowline Cattle? _____

Applicants may be interviewed by phone. What time works best for you? _____ AM / PM

Please list 2 ALR references including their address and phone number. (May not be a family member)

Junior's Signature: _____

Date: _____

Parent or guardian signature: _____

Date: _____
