

CALF SCRAMBLE FORM – DUE TUESDAY, SEPTEMBER 20th, 2016

Name_____

Address_____ City_____ Zip_____

Cell Phone#_____ Age_____ (as of Aug. 31, 2016) Date of Birth_____

Club_____ Email_____

Select Show(s) you want to scramble at: ___Ft. Worth ___San Antonio ___Houston ___Austin ___San Angelo

Form is due to our office by **Tuesday, September 20th**. You are welcome to fax the form to 210/631-0429 or scan and email to paxtell@ag.tamu.edu.

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