

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.***

I would like to be notified about next year's LMSPA Fleece Sale: Yes or No

