BullSELECT Workshop
Expressions of Interest Form

Contact Person:
Name/s:
Address:
State:   Postcode:
Phone:         Fax:
Mobile:         Email:

Breed(s)*:       Member ID(s)*:

*The opportunity exists for two or more seedstock herds in the same locality (e.g. breed promotion groups) to run a combined “BullSELECT” workshop. Please add details of all stud enterprises participating, one contact person and the desired workshop location.

Preferred Date(s):  1.    2.    3.

Expected number of people that you intend to invite*:
* SBTS/TBTS advise that a maximum group size of 50 would be preferable, to allow good interaction and a higher quality workshop for all involved, but larger groups can be catered for.

I am a (Please Tick One):
☐ SBTS/TBTS Stakeholder or Member of a Stakeholder Breed Society  ☐ Non-Stakeholder eg. Private Consultant, State Government Department

Directions to the workshop location* from nearest Town:

*The workshop can be run anywhere with adequate facilities eg on farm, show grounds, sale yards. Venue hire and cattle transport (if applicable) will need to be paid by the seedstock producer(s).

Contact and Return details:
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