

TENBURY SHEEP SALES ENTRY FORM – SALE DATE:EMAIL your entry to info@nickchampion.co.uk or call 01584 810555 or 07768 621711

Trading Name:		Client Account No:	
Address:			
Postcode	CPH No:	Flock No:	
Tel/Mobile:		Email:	
VAN No:	FABBL No:	Expiry Date:	

(New vendors, please provide bank details to receive settlement by BACS)**STORE LAMBS & EWE LAMBS: Total Count:**

No. of Lots & Size(s) Eg. 4 x 30	Breed (Sire x Dam) Eg. Texel x NC Mule, Suffolk x Welsh Mule, Charollais x etc.	Mixed/ Wether/ Tup/ Ewe	Name of Treatments <i>Blue Tongue (BT), Heptavac/Ovivac/Bravoxin Clik/Clik Extra/Crovect/Dip etc.</i>	Treatment Date(s)

BREEDING EWES: Total Count:

No. of Lots & Size(s) Eg. 4 x 20	Breed (Sire x Dam) Eg. Suffolk x Welsh Mule, North Country Mule, Texel x, etc.	Age	Name of Treatments <i>Blue Tongue (BT), Footvax Enzovax/Toxovax/Heptavac Clik/Clik Extra/Crovect/ Dip (Golden Fleece) etc.</i>	Treatment Date(s)

BREEDING RAMS: Total Count:

Number	Breed Pedigree registered, purebred or crossbred	Age	Name of Treatments	Treatment Date(s)

CULL/GRAZING SHEEP: Total Count:**Subject to withdrawals Yes/No**

Number	Breed	Ewe/Ram /Wether	(if in withdrawal) Name of Treatments	Treatment Date(s)