

**FACTS TOUR PARTICIPATION FORM**

April 15-18, 2004

(Please print or type. Separate form needed for each person.)

Name: \_\_\_\_\_  
(for nametag)

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ (Day) \_\_\_\_\_ (Evening)

County: \_\_\_\_\_

FACTS Participant \_\_\_\_\_ (Yes) \_\_\_\_\_ (No)  
(Have cattle in Kansas)

Hotel Rooms are double occupancy.  
Name of person you wish to room with during this trip: \_\_\_\_\_

Emergency Contact Person:  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Have you been out of the country within the last year? \_\_\_\_\_  
If so, when and where? \_\_\_\_\_

\_\_\_\_\_  
(Information required for bio-security purposes)

Amount of Payment due: \_\_\_\_\_  
Please make checks payable to the KENTUCKY CATTLEMEN'S ASSOCIATION. Please return money and this form to the KCA office no later than March 12th. KCA, 176 Pasadena Drive, Lexington, KY 40503.

Signature: \_\_\_\_\_