

**Dairy Goat Society of Australia - Victorian Branch**

*Application to hold a 24 hour milk production test*

l/We.......................................................................................................................................

(Name & Address of Individual or Group)

wish to apply to hold a 24 hour milk production test during 2019/20

The venue for this test will be:-

 ……………………………………………………………………………………………………………………………….

Only one person is required to supervise the strip out, milking of the does, weighing, recording & sampling of the milk.

It is recommended that you nominate more than one person as a steward in case of unforseen circumstances

The supervising steward(s) will be:-

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Butterfat testing will be carried out by:-

Company Name.............................................................................

Town ……………………………………………………………………………

**SIGNATURE....................................................................................................**

**Send to**  DGSA Victorian Branch Secretary

 BRYONY LEPOIDEVIN

153 WITT STREET BENALLA

OR EMAIL

secretarydgsavic@gmail.com