



SHU  
OLD BIRDS  
**OGILVIE TROPHY**  
(Individual Performance)

Loft No

Loft Name

Address

Post Code

Telephone No

Ring No

Colour

Sex                      Cock                       Hen

Race Point

Date of Race  /  /

No of Birds

Position

Distance

Velocity

Organisation

Any other relevant information

**Certified by Organisation/s**

President   /  /

Secretary   /  /

*Please return completed form to SHU office*