



BICA Hunt Event Seed Money

Application

Member Name: _____

Address: _____

City: _____ State/Province: _____

Location/Region of Event: _____

Date(s) of Event: ____ / ____ / ____

Give a summary of your event. (additional room on back of form)

How many participants do you expect? Is there a maximum number of participants? _____

Will there be a fee for your event, and if so, what will that be? _____

Do you plan to have sponsors? _____

Will your event be open to other breeds? _____

How do you plan to follow up with participants to reinforce keeping Bracchi in the field?

(additional room on back of form)

Please return this completed form to BICA Secretary Megan Waters:

braccoitalianoclubofamericabod@gmail.com