



## Form 1 - VEAL PRODUCER/MARKETER REGISTRATION FORM

As prescribed by Section 3(a) of O. Reg 58/15 made under the *Farm Products Marketing Act*

The undersigned is a person engaged in producing or marketing veal cattle in Ontario and registers the following information with Veal Farmers of Ontario:

### Business Contact Information

Contact Name:	
Business Name:	
Other contact / business partner(s) name(s):	
Address:	Full civic address:
	Mailing address (if different):
Phone #:	
Fax #:	
Cell #:	
Email:	
Premise ID #:	

### Description of the business (check applicable)

- ☐ Producer (check all that apply)
- ☐ Male dairy calves/bob calves (150 lbs and less)
  - ☐ Preconditioned/started calves (up to 450 lbs)
  - ☐ Marketed/finished veal (769 lbs and less – live weight)
- ☐ Cattle Dealer
- ☐ Sales Barn/Auction Market
- ☐ Processor

Please register me for *Calf Care Corner* monthly eblast: ☐ Yes ☐ No ☐ Already registered

Please register me for *The Connection* weekly eblast: ☐ Yes ☐ No ☐ Already registered

I wish to receive the magazine *The Connection*: ☐ Yes ☐ No ☐ Already receive it

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(town/city) (month)

**Please return to:**  
**Veal Farmers of Ontario**  
449 Laird Road, Unit 12, Guelph, ON N1G 4W1  
Tel: 519-824-2942 Fax: 519-824-2534  
[info@vealfarmers.ca](mailto:info@vealfarmers.ca)

\_\_\_\_\_  
Signature