



# Dairy Focus Team

## The University of Illinois

### FARM REGISTRATION FORM

NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIPCODE \_\_\_\_\_

#### FARM INFORMATION

NUMBER OF COWS: LACTATION \_\_\_\_\_ DRY \_\_\_\_\_

MILKING PARLOR TYPE \_\_\_\_\_

HOUSING TYPE \_\_\_\_\_

FARM GOALS

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WHAT DO YOU FEEL IS THE BIGGEST ISSUE FACING YOUR FARM?

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\*ALL INFORMATION WILL BE KEPT CONFIDENTIAL AND WILL ONLY BE USED BY THE DAIRY FOCUS TEAM\*