DAIRY CATTLE ENTRY FORM

Section D | PIC: MHCH 0590

Email entries to: secretary@circularheadshow.com.au

Circular Head
AGRICULTURAL SOCIETY INC.

ABN: 77 813 295 148

EXHIBITOR DETAILS

Exhibitor ______________________ Phone ______________________

Address ______________________ PIC No ______________________

Email ______________________

SECTION	CLASS	BREED	NAME OF ANIMAL	DOB	REGN NO.	EXHIBITOR	ENTRY FEE

SECTION	CLASS	BREED	NAME OF ANIMAL	DOB	REGN NO.	EXHIBITOR	ENTRY FEE

Waiver form must accompany entry form

ENTRY FEES	
MEMBERSHIP ($40)	
TOTAL TO PAY	

DECLARATION

1. In signing this form, I/We acknowledge and agree to abide by the RULES & REGULATIONS of the abovementioned Society and furthermore;
2. In relation to Johne's disease and trichomoniasis in cattle, I/we know of no circumstances that might make any exhibit a source of infection or contagion to other animals it may come into contact with or be near.
3. The animals listed are TESTED / UNTESTED (please circle) in relation to Johne's disease and trichomoniasis.
4. I declare that the animals are fit and healthy.

Signed: _____ **Date:** _____

NOTICE TO JUNIOR COMPETITORS

All competitors/exhibitors under 18 in Sections B, C & D MUST have entries countersigned by a parent/guardian.

Signature: _____ Print name: _____

(Parent/Guardian)

Entries to: **Email:** **secretary@circularheadshow.com.au** Phone: 0447 627 991

How to Pay:

Bank: Bendigo Bank
BSB: **633-000**
Ref: **DC** and your name

Name: **Circular Head Agricultural Society Inc**
Acct No: **168 709 251**
Send payment receipt to treasurer@circularheadshow.com.au

Bank Details for payment of Prize Money:

Bank & Branch: _____ Acct Name: _____

BSB & Acct No: _____

You may be contacted to verify account details before payment is made