STUD BEEF CATTLE ENTRY FORM

Section C | PIC: MHCH 0590

Email entries to: secretary@circularheadshow.com.au

EXHIBITOR DETAILS

Exhibitor ______________________________

Address ______________________________

Phone ______________________________

Email ______________________________

PIC No ______________________________

CLASS	DOB	SIRE /BREED	NAME OF EXHIBIT	ENTRY FEE

CLASS	DOB	SIRE /BREED	NAME OF EXHIBIT	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 J-BAS Status (please tick box) (Please attach proof if score is above 6)

0	2	4	6	7	8

Please note if may be necessary for you to produce written confirmation of the above

3 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
ABN: 77 813 295 148

How to Pay:
Bank: Bendigo Bank
Name: **Circular Head Agricultural Society Inc**
BSB: **633-000**
Acct No: **168 709 251**
Ref: SB and your name
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