ENTRY FORM. www.chudleighshow.com.au

Section	Class	Exhibitor/Rider	Date Birth	Name of Exhibitor	Entry Fee

In signing this form I/we acknowledge and agree to the rules and regulations of the above Society.

Exhibitor: _____

Address: _____

Phone: _____

Email: _____

Signature: _____

ENTRY FEES MUST ACCOMPANY ENTRIES.
ENCLOSE STAMPED, SELF ADDRESSED ENVELOPE FOR MEMBERSHIP TICKETS AND RECEIPT IF REQUIRED.
ENTRIES CLOSE 13TH FEBRUARY 2017.

All exhibitors will be charged entry fee at gate.
Membership passes may be pre-purchased at a cost of $20 - allows entry for 2 adults and 2 children.

Entries to:

Chudleigh Show Society
P. O. Box 437, DELORAINE 7304

Cheques may payable to:
Chudleigh A & H Society.
Direct Deposit:
Bendigo Bank: BSB: 633-000
Account No: 1473 69102.