

IPSWICH SHOW SOCIETY BRUTE UTE MUSTER



Entry No. _____

IPSWICH SHOW MUSTER – ENTRY FORM

All entrants must complete an Entry Form prior to Local Show Judging

ENTRIES CLOSE: Please Refer to Show Schedule

P – 07 3281 157

E – info@ipswichshow.com.au

ENTRIES CAN BE LODGED	ONLINE ENTRIES: www.ipswichshow.com.au/entries
	POSTAL ENTRIES: Ipswich Show Society PO BOX 812 Booval QLD 4304 Note: Entry Fee Must Accompany Entry Form
	CREDIT CARD: VISA/MASTERCARD (please circle) card holder – via email or post Name of cardholder: _____ Card Number: _____/_____/_____/_____ CVC No: _____ Expiry: ____/____/_____ Amount to be deducted: \$ _____
	IN PERSON AT SHOW OFFICE: Ipswich Showgrounds, 81 Warwick Road, Ipswich Qld 4305 Office Hours: Mon-Fri 8.30am to 4.30pm

EXHIBITOR NAME: _____ Ph: _____

POSTAL ADDRESS: _____

EMAIL ADDRESS: _____ DOB: (if Junior) ____/____/_____

VEHICLE MAKE/MODEL: _____	REGISTRATION No. _____
VEHICLE COLOUR: _____	YEAR: _____ CYLINDERS: _____
OWNER <input type="checkbox"/>	DRIVER <input type="checkbox"/>
SHOW ENTERED: <u>Ipswich</u>	SUB CHAMBER: <u>West Moreton</u>

NOMINATED CLASS/ES:					
Street Ute <input type="checkbox"/>	B & S Ute <input type="checkbox"/>	Chicks Feral <input type="checkbox"/>			
4 x 4 Ute <input type="checkbox"/>	Work Ute <input type="checkbox"/>	Feral Ute <input type="checkbox"/>			

*False or Misleading information given by the entrant may lead to disqualification from this event and for the duration of the Competition.

NOMINATION FEE:

\$5.00 per vehicle entry in each category plus \$20.00 admission to Showgrounds – all passengers **MUST** pay full Show admission price. (Show level only. There are no nomination fees for Sub Chamber or Chamber finals.)

ENTRANTS DECLARATION:

I have read and understood the Ute Muster Rules and agree to be bound in all respects by these Rules and the Rules and By-Laws of QCAS.

I have won a previous class at another Show in the current show season: YES NO

If YES name of show: _____ Name of Class: _____

Signature of Entrant: _____ Date: ____/____/_____

Signature of Show Society/Sub Chamber Representative: _____

Show office/Sub Chamber Coord Use Only:			
Show Society Judging:		Sub Chamber Judging:	
Winner <input type="checkbox"/>	(Fwd. this form to Sub Chamber Coord)	Winner <input type="checkbox"/>	(Fwd. this form to QCAS Office)
Runner Up <input type="checkbox"/>	(Fwd. this form to Sub Chamber Coord)	Runner Up <input type="checkbox"/>	(Fwd. this form to QCAS Office)
Placing <input type="checkbox"/>	(Retain this form for your records)	Placing <input type="checkbox"/>	(Retain this form for your records)