



Office Use ONLY
 Receipt No:
 Section No:

MINIATURE GOATS ENTRY FORM

ENTRIES CLOSE: Please Refer to Show Schedule

P – 07 3281 1577

E – info@ipswichshow.com.au

ENTRIES CAN BE LOGGED	ONLINE ENTRIES: https://ipswichshow.com.au/schedules-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: _____/_____/_____/_____ Expiry: ____/____ CVC No: _____ 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: _____

Suburb: _____ **State:** _____ **Postcode:** _____

Email: _____ **DOB: (if Junior)** ____/____/____

PLEASE PROVIDE BANK DETAILS BELOW FOR ANY REFUNDS OR PRIZE MONEY TO BE ISSUED:

NAME OF ACCOUNT HOLDER: _____

BSB: _____ **ACCOUNT NUMBER:** _____

Entries subject to terms and conditions set out in the Society's Rules, By-Laws and Regulations which I understand are available to me on request and by which I agree to be bound whether or not I have read them and I agree that all competitions are under the complete and total control of the IPSWICH SHOW SOCIETY whose decision in all matters is final.

CLASSES	FULL NAME OF EXH.	SEX	DOB	MONTHS	REGO NUMBER	EAR TAG	SIRE	DAM	FEES

JUNIOR HANDLER CLASSES

CLASS	JUNIOR HANDLER NAME	HANDLERS DOB	ANIMAL BEING HANDLED	FEES

BREEDERS AND PROGENY CLASSES

CLASS	1 ST EXHIBIT NAME	2 ND EXHIBIT NAME	3 RD EXHIBIT NAME	FEES
	1	2	3	
	1	2	3	
	1	2	3	

In respect of this exhibit and prize money payable please complete the relevant section below to comply with GST Regulations.

I am registered for GST: Yes No My ABN is: _____

DECLARATION: I hereby declare that the activity that I am engaged in which relates to services by me is a **recreational hobby** undertaken by me. Please accept my above entry to your Society. I agree to indemnify the Ipswich Show Society against liability for any incident, damage, loss or illness to any exhibit, exhibitor or competitor and agree that all competitions are under the complete and total control of the Ipswich Show Society whose decision is final. I have read & understood the Terms & Conditions of Entry.

SIGNED: _____ **DATE:** ____/____/____

*** Please ensure you have filled out a Biosecurity Animal Health Declaration/Movement Record**