Cloncurry & District Show Society Inc

P O Box 17
Cloncurry Qld 4824
Email:cloncurryshow@gmail.com

NOMINATION FORM

PLEASE PRINT IN BLOCK LETTERS

NAME _____

ADDRESS _____

CONTACT NUMBER _____

ENTRY FORM FOR ALL PAVILION SECTIONS

SECTION	CLASS	NO. ENTRIES	FEE
	TOTAL ENTRY FEES		**$**

I hereby request that you will enter, subject to Rules & Regulations of the Society, the aforementioned exhibits for your Show. I will accept and will abide by the conditions of entry and recognise that the Judge's decision will be final and legally binding.

SIGNATURE: _____ **DATE** _____