IPSWICH SHOW SOCIETY

Po Box 812 Email: admin@ipswichshow.com.au PH: (07) 3281-1577
Booval QLD 4304 URL: http://www.ipswichshow.com.au FAX: (07) 3812-1537
ABN : 37-438-074-435

ENTRY FORM

PLEASE READ CAREFULLY

Please read and sign both sides of this form. No forms will be accepted if not filled in completely and signed.

Exhibitors are requested to send their entry form to the Secretary/Manager, Ipswich Show Society P.O. Box 812, Booval, 4304, as early as possible before the closing date specified in the Schedule.

NO LATE ENTRIES ACCEPTED. NOT MORE THAN ONE SECTION TO BE ENTERED ON THIS FORM.

Please Circle
Mr. Mrs. Miss Ms

Name of Exhibitor

Address

Post Code

Telephone Business Hours _____ Fax No. _____

Telephone After Hours _____ Email Address. _____

Statement By Exhibitor

☐ The Supply I make in entering THE ABOVE SECTION is made to the Ipswich Show Society in my capacity as an individual in the course of an activity which is a private recreation pursuit or hobby.

☐ I am NOT registered for GST and my ABN is as follows. _ _ _ _ _ _ _ _ _ _ _

☐ I am Registered for GST and my ABN is as follows. . _ _ _ _ _ _ _ _ _ _ _
I agree that the Ipswich Show Society can issue Recipient Created Tax Invoice in respect to Prize Money and I will issue a Tax Invoice in respect to Prize Money. I will notify the Ipswich Show Society if I cease to be registered for GST. The Ipswich Show Society is registered for GST (ABN 37-438-074-435) and agrees to notify you if it ceases to be registered.

Please accept my above entries to the General Conditions of Entry & Competition and Conditions of Entry of your Association. I agree to indemnify the Ipswich Show Society against liability for any damage, loss or illness to any exhibit, exhibitor or competitor and agree all competitions are under the complete and total control of the IPSWICH SHOW SOCIETY whose decision in all matters is final.

Entry Fee does not entitle free entry to the Annual Show.

Signature of intending Exhibitor
X…….Date……

Office Use ONLY
Receipt No……..…
Section No...……...…….

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POULTRY / WATERFOWL / PIGEON / CAGED BIRDS ENTRY FORM

Please read and sign both sides of this form. No forms will be accepted if not filled in completely and signed.

Section Number you are entering ……

Class	Description of Entry:	No Of Entries	Fee	Pen No.
		Total		

Name……..……
…

Signature of intending Exhibitor
X…….Date……