## **GROUP 5 ANIMAL SHOWS ENTRY FORM**

Please circle the	show you inte	end to enter								Duonoutry	Identification Code	(DIC) by bare and	imal was look hale	
Albion Park NI464602	Dapto	Kiama	Berry NI464606	Nowra NI464610	Kangaroo Valley	Milton	Robertson 464609	Moss Vale	Camden	Bulli	Picton NF464615	— — — —	That was last field	
Please circle the	type of anima	l being exhibited	(one form per anima	l type)										
Dairy Cattle	Beef Cattle	Sheep	Goats Dair	y Goats Alpaca	Llama			A separate en	try form required	l for each Prope	erty Identification (	Code		
Exhibitors Name  Stud Name  Property Address Suburb State P/code  Postal Address Suburb State P/code  Home Phone Mobile Phone  Fax Number							<ol> <li>By signing this entry form you agree to abide by all the rules and regulations of the applicable Show Society and relevant state legislation.</li> <li>All forms including waivers must be completed, signed and returned to the applicable Show Society along with all entry fees in accordance with the applicable show schedule.</li> <li>Late entries will NOT be accepted under any circumstances.</li> <li>All exhibitors must complete Relevant 'Animal Health Australia Herd Health Status Declaration' &amp; required NSW Legislative declarations including when applicable a 1. Dairy Assurance Score BJD Declaration &amp; 2. Goat and Sheep National Vendor Declaration or Travelling Stock Statement.</li> <li>NSW Legislation requires a Travelling Stock Statement for all stock Movements.</li> </ol>							
Section / Cla	ıss	Breed		Animal's nam	e		D	OB Sire			Dam		Fee	
												Gate Fee		
Please list all neo	onle who will l	he attending the s	how as part of your s	how team								TOTAL FEES		
Name	opie who whi	Mobile number			Role on show day									
							Con	mpetitor first nam	first name		last name			
							Con	mpetitor's signatu	re			Date		
								SE	ND TO: The S	ecretary, PO	Box 3044, Rober	tson NSW 2577		