DAIRY GOATS
APPLICATION FOR ENTRY

ENTRIES CLOSE WEDNESDAY 6 JUNE 2012 at 4.30PM

ROYAL QUEENSLAND Show

INSTRUCTIONS

- Please check printed details and make changes in the boxes provided.
- Use a black or blue pen and clearly print in BLOCK LETTERS. Leave one box between words. Complete EVERY part of this Application for Entry except for sections marked "OFFICE USE ONLY". TICK '✓' checkboxes '☐' where applicable. The Exhibitor **MUST SIGN** the Application for Entry.
- Submit your entries online at www.royalqueenslandshow.com.au
- **Post this Application to the Entries Department, RNA, Locked Bag 1010, Albion QLD 4010 or fax (07) 3253 3988 or email entries@royalqueenslandshow.com.au.**
- Please retain a copy of this Application for Entry for your records.

EXHIBITOR DETAILS

(Exhibit must be bona fide property of Exhibitor)

TEL
MOBILE
FAX
EMAIL

NAME OF EXHIBITOR

POSTAL ADDRESS

TOWN/CITY | STATE | POSTCODE

CONTACT PERSON

TELEPHONE | MOBILE

FAX | EMAIL

RNA MEMBERSHIP

Please advise if you are a current QLD RNA Financial Member ☐ YES ☐ NO

RNA Membership Name ..... RNA Membership No .....

STATEMENT BY EXHIBITOR

It is a condition of entry to the Royal Queensland Show that all Exhibitors must complete a declaration of their taxation status. If you do not complete this section of the form we may be required to withhold 46.5% of your prize payment.

☐ The supply I make in entering this competition is made to the RNA in my capacity as an individual in the course of an activity which is a private recreational pursuit or hobby

OR

☐ I **am not** registered for GST and my ABN is as follows:

ABN: _ _ _ _ _ _ _ _ _ _ _

OR

☐ I **am** registered for GST and my ABN is as follows:

ABN: _ _ _ _ _ _ _ _ _ _ _

I agree that the RNA can issue Recipient Created Tax Invoices in respect to Prize Money and I will not issue a tax invoice in respect to Prize Money. I will notify the RNA if I cease to be registered for GST. The RNA is registered for GST (ABN: 41 417 513 726) and agrees to notify you if it ceases to be registered.

PAYMENT OF PRIZE MONEY

Please note that prize payments are now paid via electronic funds transfer only. You may forgo your prize payment if you do not provide bank account details.

BANK	BRANCH	
ACCOUNT NAME	BSB NO	ACCOUNT NO

METHOD OF PAYMENT FOR ENTRIES

☐ I enclose a **cash/cheque/money order** Please **debit** my: ☐ VISA ☐ MASTERCARD for: **$** ____ • __

(Cheques/Money orders made payable to the RNA)

Card Number _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _ Expiry Date _ _ / _ _ Validation Code _ _ _

All details must be completed (Validation code is the last 3 digits of the number in the signature panel at the back of your credit card)

Cardholder's Name ..... Cardholder's Signature .....

CONDITIONS OF ENTRY

(a) I hereby apply to enter the foregoing exhibits in terms of and upon the conditions set out in the Association'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.

(b) I acknowledge that:-

(i) The Association is at liberty to consider or to refuse to consider this application, in its absolute and unfettered discretion.

(ii) If the Association considers this application, it may choose to reject it, in its absolute and unfettered discretion.

(iii) If the Association does not consider or rejects the application it shall not under any circumstances be required to give its reasons for so doing.

(iv) Neither receipt by the Association of this application nor of monies lodged with the Association in connection with the application, nor the issue of a receipt or any other acknowledgement in respect of such monies, nor the banking of such monies, shall create any obligation on the Association to consider or accept this application.

(v) On acceptance of this application, all the terms of the agreement between the Association and me are as contained or expressly incorporated in this form, and I agree that all representations and statements not appearing herein or in the Rules, By-laws and Regulations are hereby excluded.

(c) I hereby certify that all particulars relative to entries set out on this form are correct in all details.

Signature of Intending Exhibitor X ..... **Date X**.....

OFFICE USE ONLY	ENTRY FEES	TOTAL		
Amount received by Reception			Receipt Date	
Amount received by Entries			Receipted By	
			Receipt No	

DAIRY GOATS

	Online	Non Online
RNA Members	$14.00	$17.00
Non RNA Members	$19.00	$22.00

NOTE: ANY ACCOMMODATION OR STALLING REQUESTS MUST BE MADE ON THE ACCOMPANYING ACCOMMODATION/STALLING REQUEST FORM

CLASS NO	NAME OF EXHIBIT	TATTOO/MICROCHIP NO	REGO NO	DATE OF BIRTH	DATE LAST KIDDING	SIRE	DAM	ENTRY FEE

ENTRIES WILL NOT BE ACCEPTED UNLESS ACCOMPANIED BY PAYMENT. ENTRIES CLOSE WEDNESDAY 6 JUNE 2012 AT 4.30PM.
ENTRIES RECEIVED AFTER THIS DATE WILL NOT BE ACCEPTED.

TOTAL $

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