



ALPACAS OFFICIAL ENTRY FORM

royal adelaide SHOW

theshow.com.au

PO Box 40, Goodwood SA 5034

This entry form will act as a tax invoice.

All fees are GST inclusive. ABN 68 531 710 498

PERSONAL DETAILS

I DO NOT WISH FOR MY CONTACT DETAILS TO BE AVAILABLE TO OTHER PARTIES

EXHIBITOR/REGISTERED OWNER: _____ STUD NAME _____

POSTAL ADDRESS: _____

STATE: _____ POSTCODE: _____

TELEPHONE: _____ FACSIMILE: _____

MOBILE: _____ EMAIL: _____

All fees and documentation of health status and a copy of the registration certificate for each alpaca (both sides), or a copy of AAA Animal Details of each alpaca entered (unregistered wethers excluded) must accompany this form. A separate form is required for each registered entity. i.e. one owner or partnership per form.

PROPERTY IDENTIFICATION CODE

--	--	--	--	--	--	--	--	--	--

CLASSES—All fees must accompany this form.

CLASS NO.	SEX	REGISTERED NAME OF ANIMAL (INCLUDING PREFIX)*	REGISTRATION NO.	DATE OF BIRTH	COLOUR	LAST SHEARING DATE	NAME OF SIRE / DAM (INCLUDING PREFIX)	ENTRY FEE
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	

ENTRY FEES	\$
ENTRY FEES (FROM OVERLEAF)	\$
LOCKER	\$
MEMBERSHIP	\$
TOTAL	\$

* Unregistered wethers require animal name or ID only. Any herd prefix of a current owner, who is not the original breeder should not be included.

** In the case of unregistered wethers, details of actual owner is required.

GST INFORMATION

I, the above named exhibitor, apply to enter as part of a Private recreational pursuit or hobby Yes

OR

I, the above named exhibitor, am entering as a GST registered business Yes

ABN:

NUMBER OF PENS REQUIRED (EACH 1.8 X 1.5M)

HEALTH STATUS (PLEASE TICK)

MN3 MN2 MN1 Q ALPACA

CHECK TESTED HERD EXHIBITS ONLY TESTED

OFFICE USE ONLY CHECKED BY..... DATE.....

ENTR	MEM	DISC			TOTAL

CONDITIONS OF ENTRY—Must be signed for entry to be accepted

- I agree to comply with and be bound by the General and Special Regulations and By-Laws of the RA&HS of SA Inc as applicable
- I certify that the details on this entry form are true and correct
- I/We verify that I am the registered owner/lessee of the above exhibits
- To the best of my/our knowledge, the animal/s entered above have not been exposed to any notifiable disease/s.

Signature:

Date:.....

(Parent or Guardian must sign if exhibitor under 18 years)

CLASSES—All fees must accompany this form.

CLASS NO.	SEX	REGISTERED NAME OF ANIMAL (INCLUDING PREFIX)*	REGISTRATION NO.	DATE OF BIRTH	COLOUR	LAST SHEARING DATE	NAME OF SIRE / DAM (INCLUDING PREFIX)	ENTRY FEE
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	
							S	
							D	

TOTAL (FOR THIS PAGE) \$