



PRESENTING PARTNER



# GRAINS & FODDER - AGRICULTURAL BUREAU

## OFFICIAL ENTRY FORM

This entry form will act as a tax invoice. All fees are GST inclusive. ABN 68 531 710 498

### HOW TO ENTER

- Please ensure all details are printed clearly and correctly.
- Submit entries online at [www.theshow.com.au](http://www.theshow.com.au)
- Post Entry Form to Grains & Fodder Section, PO Box 108, Goodwood SA 5034 or deliver to Adelaide Showground, Secretary's Office, Rose Terrace Entrance, Wayville SA.
- **Faxed or emailed Entry Forms WILL NOT be accepted.**

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

BUREAU NAME: \_\_\_\_\_

BUREAU CONTACT PERSON : \_\_\_\_\_

BUREAU CONTACT PERSON PHONE NUMBER: \_\_\_\_\_

BUREAU POSTAL ADDRESS: \_\_\_\_\_

STATE: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

MOBILE: \_\_\_\_\_ FACSIMILE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### RA&HS of SA Inc MEMBERSHIP

PLEASE ADVISE IF YOU ARE A CURRENT RA&HS of SA Inc FINANCIAL MEMBER  YES  NO

MEMBERSHIP NAME: \_\_\_\_\_ MEMBERSHIP NUMBER: \_\_\_\_\_

### GST INFORMATION—PLEASE COMPLETE EITHER GST INFORMATION OR HOBBYIST DECLARATION

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:

### PAYMENT OF PRIZE MONEY

BANK NAME: \_\_\_\_\_ BRANCH (LOCATION): \_\_\_\_\_

ACCOUNT HOLDER NAME: \_\_\_\_\_ BSB NO.:    -    ACCOUNT NO.:

### 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 have read and accept the RAHS Privacy Policy and Collection Notice
  - I certify that the details on this entry form are true and correct.
- Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Guardian must sign if exhibitor under 18 years)

### PAYMENT DETAILS GRAINS & FODDER - RS\_\_CGF

OFFICE USE ONLY	ENTR	MEM					TOTAL	INV NO.
CHECKED BY _____ DATE _____								<small>(Finance Only)</small>

METHOD OF PAYMENT:  Cash  Cheque  Money Order  Credit Card

TYPE OF CARD:  VISA  Mastercard  Amex/Diners (3.5% fee applies)

NAME ON CARD: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

CARD NO:

EXPIRY DATE:  /

AGRICULTURAL BUREAU CLASS NUMBER:		GRAIN TYPE:	
SAMPLE NO	Type eg Malting, Feed, Milling	NAME OF GROWER, ADDRESS, PHONE NUMBER	VARIETY
1			
2			
3 (Wheat only)			

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SAMPLE NO	Type eg Malting, Feed, Milling	NAME OF GROWER, ADDRESS, PHONE NUMBER	VARIETY
1			
2			
3 (Wheat only)			

PAYMENT DETAILS						
ENTRY FEE	MEMBER \$10.00	NON-MEMBER \$10.00	X	NO. OF ENTRIES _____	= \$ _____	CGF ENTR
				TOTAL:	= \$ _____	CGF ENTR
ARE YOU A FIRST TIME EXHIBITOR IN THE GRAINS & FODDER SECTION?				YES	<input type="checkbox"/>	NO <input type="checkbox"/>
DO YOU REQUIRE SAMPLES TO BE PICKED UP?			YES	<input type="checkbox"/>	NO	<input type="checkbox"/>