2024 ROSEWOOD AGRICULTURAL & HORTICULTURAL ASSOCIATION INC. GENERAL ENTRY FORM

Exhibitors are requested to send their Entries to the Secretary, Rosewood A. & H. Association Inc., P.O. Box 19, Rosewood, Qld. 4340 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.** Entry Fee must accompany this form.

THIS IS A COVID SAFE EVENT - PLEASE COMPLY WITH THE CURRENT QUEENSLAND HEALTH REQUIREMENTS.

Entry Fee must be paid at the Show Office OR by direct deposit to Bendigo Bank - **BSB: 633-000**. Account Number: **133617597** Details: Surname and Section Entered (Photography). Evidence of payment is to be shown when entries are delivered.

Showground's Secretary Office will be open from Monday 24th June 2024

TO THE SECRETARY - Subject to the By-Laws and Regulations of the Queensland Chamber of Agricultural Societies, except where such may be modified or added by By-Laws and Regulations of the Rosewood Show Society, all of which are deemed herein as if included and inserted at full length. I, the undersigned made the following Entries for the forthcoming Show, the same being my bona-fide property: -

FOR OFFICE USE ONLY	SECTION	CLASS		E PARTICULARS OF EXHIBIT & ALL EXHIBITS ame of Animal, Date of Birth and Breed.	Entr \$	y Fee ¢
Example	Food & Cookery	Class 1	Plum Pudding		2	00
	Joone, y					
NAME OF EXH (Block Let		s, Miss, Ms				
POSTAL ADDR	ESS					
your association ction, suit, clair	on accepts the fe	ees I agree to at I may have	abide by any decision of its cor against it, them, or any of ther	e entered and declare the exhibits to be my property and mmittee and to release the Rosewood Show Society, its confor or in conjunction with any loss, damage or injury suff	mmittee and membe	ers from any
				id-19 Health directives current at the time of show. I und unds must sign in with the QR code for the contract traci		
osewood Show	Society will be	paying all pri	ize money via direct deposit. F	Please include your bank account details.		
SB		A	ccount Number	Account Name		
GNATURE OF I	XHIBITOR					
ffice Use	Receipt No.			Date		