

CLUNES & DISTRICT AGRICULTURAL SOCIETY INC.

ENTRY FORM - HORSES ONLY

Please fill in all the details (except EXHIBIT No. column) and enclose copy of Registration Papers
& current membership For All Breed Classes and return by closing date to:

Mrs Angela Flowers, 191 Learmonth Rd, Clunes 3370

NOTE: A copy of your entries will be returned ONLY if a stamped self addressed envelope is enclosed, otherwise all details will be in the Stewards book on Show Day

CLASS No	NAME OF HANDLER AND/OR RIDER	NAME OF ANIMAL	REG. No (if appl)	EXHIBIT No	ENTRY FEE
				O	
				F	
				F	
				I	
				C	
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				S	
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				Y	

PLEASE SIGN BELOW CONFIRMING YOU HAVE READ PRIVACY POLICY ON REVERSE SIDE OF ENTRY FORM.

Name: _____

Phone: () _____

Address: _____

Email: _____

Signed: _____

**All entry forms must be signed
or entry will be returned**

Entry Fee(s)	
Members Ticket \$22	
TOTAL	

I agree to abide by the Rules and Regulations of the EFA and abide by the Disciplinary Actions and Penalties of the EFA Disciplinary Committee.

ENTRY FEES MUST BE INCLUDED