



General Entry Form

ONE SECTION PER ENTRY FORM - Entry Fee **must** accompany Entry Form
NO LATE ENTRIES WILL BE ACCEPTED

PLEASE PHOTOCOPY THIS ENTRY FORM IF ADDITIONAL SPACE IS REQUIRED

Entrant's Details
(Please print clearly)

Entrant Name: _____

Address: _____

Phone Number:..... Mobile: Email:.....

Section:-

Class	Particulars of Exhibits	Entry Fee \$	
Total of Entry Fees		\$	
Total Amount Paid		\$	

It is a condition of entry to the Roma Show that all exhibitors must complete a declaration of their taxation status. Please tick appropriate box and record your ABN where applicable. I also agree that the Roma Show Society may issue a Recipient Created Tax Invoice in respect to Prize Money on my behalf.

Are you undertaking this activity as a hobby? Yes No
 Is this activity part of a business? Yes No
 If yes, do you have an ABN? Yes No

If yes your ABN number _____

Receipt (Please complete and hand to Section Steward)

Name: _____

Address: _____

No of Classes: _____ Total Entry Fees Paid: _____ Paid by: Cash/Cheque/Direct Deposit

Signed (by Entrant): _____

