

2021 REDCLIFFE SHOW – NEEDLEWORK ENTRY FORM

Exhibitor No (office use only)

To the Redcliffe Show Secretary (or representative section or subcommittee), subject to the rules, by-laws and regulations of the Society and the Queensland Chamber of Agricultural Societies which are deemed to be included therein as if inserted at length, I make the following entries for the 2021 Redcliffe Show. **If printing, please print clearly all the details** for the classes you are entering. Illegible information will cause **errors**.

Section	Cat. No.	Class No.	Full Description of Entry	Entry Fee	Sell Price (if applicable)
TOTAL PAID				\$	

Exhibitor name (print).....

Email* Mobile/Phone No.....

Home address Postcode.....

I have read and agree to the Conditions of Entry/Regulations applying to the Needlework Section I have entered and declare the exhibits to be my property and eligible to contest events entered. If your association accepts the fees I agree to abide by any decision of its committee and to release the Redcliffe Agricultural Society, its committee & members from any action, suit, claim or demand that I may have against it, them, or any of them for or in conjunction with any loss, damage or injury suffered by me on the premises of the association, or at, or during the show.

Signature of exhibitor Date

<p>Upon delivery of exhibits, answer these questions. If under 18 yrs, parent/guardian to sign.</p> <p>In the previous 14 days, have you:</p> <ul style="list-style-type: none"> • Had any COVID-19 symptoms? Yes No • Been in contact with any confirmed/suspected COVID-19 cases? Yes No • Travelled internationally or from a hotspot? Yes No <p>Name:</p> <p>Signature:</p> <p>Date:</p>	<p>Upon collection of exhibits, answer these questions. If under 18 yrs, parent/guardian to sign.</p> <p>In the previous 14 days, have you:</p> <ul style="list-style-type: none"> • Had any COVID-19 symptoms? Yes No • Been in contact with any confirmed/suspected COVID-19 cases? Yes No • Travelled internationally or from a hotspot? Yes No <p>Name:</p> <p>Signature:</p> <p>Date:</p>
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