

ENTRY FORM

EXHIBITOR'S NAME.....

ADDRESS

.....

..... POSTCODE

TELEPHONE NUMBER FAX

I/WE HEREBY MAKE ENTRIES OVERLEAF AND AGREE TO COMPLY WITH THE RULES AND REGULATIONS AND SAFETY POLICY OF THE MID SOMERSET AGRICULTURAL SOCIETY AND ANY CONDITION WHICH DEFRA REQUIRE.

EXHIBITOR'S SIGNATURE

DATE

DATA PROTECTION

I agree to my/our entry details being published in the Show CatalogueYES

The committee is not responsible for any error that may be present in the catalogue.

<p>Please give details here if you are eligible for any of the special awards within the classes as listed in the schedule (e.g. Class 7, Best Welsh Section D.)</p>	
Donation to Red Cross	£1.00
Membership Subscription for 2009 @ £15 (optional)	£
Total Entry Fees from overleaf	£
Total payable to Mid Somerset Show	£

