Albany Agricultural Society Incorporated (1934)
Formed 1st August 1889 ABN 64 107 957 047

Secretary
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Albany WA 6331

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2010 HORTICULTURAL ENTRY FORM

Sections 7A – 7E, 8A – 8E and 9A – 9B

Cost of Entry: Adult - $1.00 Children - 50 cents

Exhibitors can lodge their entries at Show Secretary's Office until 4:00 pm on Tuesday 10th November 2010. Payment is to be made when entry cards are collected from the Marshall Pavilion on Wednesday 10th between 5:00pm and 6:00pm, Thursday 11th, Friday 12th and Saturday 13th November 2010 until 9:30am.
Late entries as per the Schedule are to be taken to Marshall Pavilion for processing and benching.
When making more than one entry in each class, please use the Class Number in each instance.

SECTION	CLASS	Number of ENTRIES	ENTRY FEES		SECTION	CLASS	Number of ENTRIES	ENTRY FEES
Sub Total A $					**Sub Total B $**			
Total Fee A+B $								

EXHIBITORS PRIVACY ACT STATEMENT

The information provided by you in this Application is collected and used by the Albany Agricultural Society Incorporated to organise and conduct competitions and or exhibitions at the Albany Agricultural Show. We may publish details such as your Name, Photograph and Exhibit details in any Albany Agricultural Society publication or communication. Such information may also be made available to, and published by the media. We will not disclose your personal information without your consent for any other purpose unless required or authorised by law. You may request access to your personal information and, if necessary, request that our records of that information be corrected by writing to the Secretary, in writing, Albany Agricultural Society Incorporated, Post Office Box 392, Albany WA 6331 or by Email: albanyag@omninet.net.au

I hereby certify the above particulars are correct and I agree to conform to and accept the rules and regulations governing this Show as described in the Schedule and I hereby hold the Society free from any liability in respect of any mistakes or errors which may be made in connection with these entries.

NAME of EXHIBITOR: _____AGE (if Child) _____

ADDRESS: _____ _____

POSTCODE: _____ SIGNATURE: _____ DATE ___/___/2010