General Entry Form

Exhibitors Name:_____

Address: _____

_____

Phone Number: _____

Section	Class	No of Entries	Description	Entry Fee
			TOTAL ENTRY FEES ENCLOSED	

I agree to abide by all the decisions of the Committee in regard to exhibits which I enter subject to the Rules and Regulations of the Society and I will not hold the Society responsible for any loss to exhibits through accident or misdelivery or any other cause.

Signed: _____ **Date:** _____

PLEASE COMPLETE THE WAIVER FORM ALSO AND PRESENT WITH THIS FORM WHEN ENTERING.