**Australian All Breeds of Miniature Goat and Sheep Society Inc.**

Show Entry Form

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**Name of Exhibitor/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Show Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Show: \_\_\_\_/\_\_\_\_\_/20\_\_\_\_**

Please fill in the details below using one line per goat, per class entered.

If you have any questions please feel free to contact the Interim Show Manager,

**Therese Purton: myaora@mail.com or 1165 Brightview Road, Brightview, Qld. 4311**

If you need more space please print an extra form and attach to you entries. A copy of this Entry Form is to be emailed to the Show Manager **one week prior to the show,** and the original is to accompany payment on the day of the show.

**\* Please email a copy of all goat registrations to the Show Manager for identification purposes, with your Entries unless otherwise arranged. Judging will begin at 9am.**

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| **Class** | **Name of Goat including Prefix** | **DOB** | **Buck or Doe** | **Registration No:** | **Ear Tag Details:** | **Registered Sire's Name** | **Registered Dam's Name** | **Fee** |
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**Exhibitor/s Signature/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_**

**Australian All Breeds of Miniature Goat and Sheep Society Inc.**

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**Name of Exhibitor/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Show Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Show: \_\_\_\_/\_\_\_\_\_/20\_\_\_\_**

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| **Class** | **Name of Goat including Prefix** | **DOB** | **Buck or Doe** | **Registration No:** | **Ear Tag Details:** | **Registered Sire's Name** | **Registered Dam's Name** | **Fee** |
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**Exhibitor/s Signature/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_**



**Australian All Breeds of Miniature Goat and Sheep Society Inc.**

Show Entry Form

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**Name of Exhibitor/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Show Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Show: \_\_\_\_/\_\_\_\_\_/20\_\_\_\_**

**Handler Classes:** Please enter details for Adult Handlers and Junior Handlers Below.

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| **Class** | **Handler's Name** | **Handler's DOB**  **For Juniors Only** | **Goats Name including Prefix** | **Fee** |
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**Progeny Classes:**

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| --- | --- | --- | --- | --- |
| **Class** | **Name of Sire or Dam** | **Name including Prefix - Progeny No 1** | **Name including Prefix - Progeny No 2** |  |
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| **Total** |  |

**Conditions of Entry: FOR ENTRIES TO BE ACCEPTED YOU MUST AGREE TO THE STATEMENT BELOW AS WELL AS SIGN AND DATE EACH PAGE SUBMITTED**

I agree to Exhibit my Goats at my own risk and I agree to follow the Show Society and AABMGS Inc. Rules, Code of Conduct and the Code of Sportsmanship at all times while Exhibiting my Goats. Any breach of this Agreement may result in the disqualification of my Goats from this show and if serious may have an impact on my ability to Exhibit my Goats at future AABMGS Inc. organised Shows.

I agree to not make any claim against the Hosting Show Society or the AABMGS Inc. for any injury to myself or my goats, or for any loss sustained at this show. I agree to confine or appropriately restrain my Goats at all times for the duration of my attendance at the Show and while on the Showgrounds.

**Exhibitor/s Signature/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_**

**For Junior Handlers under 18 years of age please fill in the details below:**

I have read, understand and agree to the above on behalf of my child/ren who are under the age of 18 years and are entered as a Kiddy or Junior Handler.

**PARENT/GUARDIAN NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_**