

**JUDGING:** 20<sup>th</sup> & 21<sup>st</sup> January  
**ENTRIES CLOSE:** 8 January 2018  
**ENTRY FEE:** \$10

## Horowhenua AP&I Show NON CHAMPIONSHIP ENTRY FORM

**Mail To:** Jo Wells PO Box 59 LEVIN  
 Phone: (06) 3686539 Fax: (06) 3686549  
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 Website: www.levinapishow.co.nz

|                   |  |
|-------------------|--|
| <b>Exhibitor:</b> |  |
|-------------------|--|

|                        |  |
|------------------------|--|
| <b>Postal Address:</b> |  |
|------------------------|--|

|                   |  |
|-------------------|--|
| <b>Stud:</b>      |  |
| <b>Phone No.:</b> |  |
| <b>email:</b>     |  |

| Class Number | Alpaca Name | Breed H/S | DOB | Colour | Age of Alpaca at Show (months) | Age of Fleece (months) | Entry Fee | Exhibit No. (Office) |
|--------------|-------------|-----------|-----|--------|--------------------------------|------------------------|-----------|----------------------|
|              |             |           |     |        |                                |                        |           |                      |
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| <b>TOTAL PAYABLE:</b><br>Cheques payable to Horowhenua AP&I Assn or internet Banking to<br>02 0668 0018171 00 Please circle payment method used |  |
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**EXHIBITOR DECLARATION**

1. I have read the AANZ Show Regulations and the entry conditions for this show. I agree to be bound by the AANZ Show Regulations and relevant A & P Society Regulations for this Show and abide by all decisions in all matters in connection with or arising out of the competition.
2. I agree that all alpaca exhibited in the show belong to a herd that has a current clear whole herd TB status and that each exhibit shall be free of disease and external parasites.
3. I indemnify the Association under the provisions of the Health and Safety at Work Act 2015 and also agree to comply with the appropriate animal legislation.
4. I certify that the details given on this entry form are true and correct.

**SIGNED:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Please enclose a copy of your TB certificate