

BOONAH SHOW
CAVALCADE OF TRANSPORT
ENTRY FORMS

NAME.....

ADDRESS.....

.....

TELEPHONE.....

EMAIL:-.....

DESCRIPTION

.....

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MAKE.....MODEL.....YEAR.....

FURTHER INFORMATION.....

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The Exhibitor **HEREBY RELEASES** to the Full Extent permitted by law the Association and its Servants, agents and contractors and employees from all claims and demands, damages, cost and expenses of every kind resulting from any accident damage loss or injury howsoever caused
I HEREBY AGREE TO ABIDE BY THE RULES AND DIRECTIONS AS SUPPLIED BY THE STEWARD.

SIGNATURE..... DATE.....