

LAST NAME

FIRST NAME

ADDRESS

POSTCODE STATE

PHONE EMAIL

ENTRY Maximum of two.

Category..... Title

Medium Price

Category Title

Medium Price

PAYMENT

Number of entries x \$30 \$.....

Return Postage \$.....

TOTAL AMOUNT \$.....

Payment method: Direct deposit..... Enclosed.....

Cheques payable to:

Direct deposit BSB Acct: Use full name as reference

Please provide your Bank account details so that proceeds from prizes or sold items can be transferred to your account.

BSB Account No.

Account Name

RETURN OF WORKS Please tick where appropriate.

Pick up by self or designated person

Name of person

Return Postage: Name, method and carrier.

If pick up arrangements change, please notify via email before close of exhibition.

I, the exhibitor named above agree to the terms and conditions of entry and declare that the work submitted by me is my own original work. Exhibitors must be over 18.

Signature..... Date

Are you registered for GST? yes/no ABN