Entry Form (BLOCK CAPITALS PLEASE)

| Exhibitor's Name: Address: Telephone Number: Email: Entry Form must be accompanied with appropriate Entry Fee | | | | | |
|---|---------------------------------|--|------|--------------|-------------------------|
| | | | ltem | Entry Fee | Official Use Only |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | nber:st be accompanied with app | nber:st be accompanied with appropriate Entry Fe | | | |

Enquiries to: Show Phone – 087 118 1680

Signed: ___

Under No Circumstances Will Entries Be Accepted After Friday 22nd of August Entries to be sent to Swinford Agricultural Show, C/O Homeland Post Box, Kiltimagh Rd., Swinford, Co. Mayo F12 WF98