Class	Name of Exhibit		TATTOO	Birth Date	BREED	T & P Points	SIRE	DAM	Entry Fee

I know of no circumstances that might render the exhibit a source of infection or contagii to other goats with which it may have contact or become in close proximity.

EXIBITOR' NAME_____

I hereby admit and acknowledge that I will participate in the competitions wholly and solely at the risk of Injury to person or property and hereby release and indemnify the Society, it's servants and agents In the terms of the show rules and regulations

ADDRESS _____

Post code _____Phone Number_____

In consideration of you accepting one or more of the above entries I hereby undertake to indemnify your Society against all claims, losses, suits and demands made against or suffered by your Society by reason of any negligent act or admission of mine.

STUD NAME_____

WAGGA SHOW P.O. Box 7256 Mt. Austin 2650 **MILKING GOATS ENTRY FORM** Signeture _____Date_____