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| **JUDGING: 21st April 2025****ENTRIES CLOSE: 1st April 2025****ENTRY FEE: Nil**  | **MACKENZIE A&P SHOW****NON CHAMPIONSHIP ENTRY FORM** | **Email To:** | Jodi Paynemackenzieapsociety@gmail.comRachel Andrewsrachel@grandviewalpacas.co.nz |

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| **Exhibitor:** |  |  |  |  |  |  |
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| **Postal** **Address:** |  |  |  | **Stud:** |  |  |
|  |  | **Phone No.:** |  |  |
|  |  | **email:** |  |  |

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| **Class Number** | **Alpaca Name/Handler Name** | **BreedH/S** | **DOB** | **Colour** | **Age of Alpaca at Show****(months)** | **Age of Fleece (months)** | **Entry Fee** | **Exhibit No. (Office)** |
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|  |  | **TOTAL PAYABLE:** |  |  |

**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 The Health and Safety 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.

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| **SIGNED:** |  | **DATE:** |  |

Please enclose a copy of your TB certificate