PLEASE READ RULE 4 - ENTRY FEES

I wish to enter exhibits in the following classes at the Show & agree to abide by the judges' decision.

Surname (block capitals):.....First Name (not initials):.....

Address:.....

.....Post Code:.....

Email:..... Tel:..... Age if under 17.....

If this forms part of a family entry, write your FAMILY name here:.....

Entry Fee Payment £..... ❑ Enclose (cash or cheque made payable to Chagford Flower Show or ❑ Bank Transfer to Chagford Flower Show.

Sort Code: 20-30-47 Account No: 20438375.

Please use your surname as the payment reference.

Please write number of entries in each Class Box (1 or 2 - maximum 2)

Entries totalling over £7.50 get a Free Show Entry ticket - enclosed a SAE with your application.

Please remove the entry form from the schedule before filling it in.

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100
101	102	103	104	105	106	107	108	109	110
111	112	113	114	115					

Please return all trophies won last year by 1st August to Jaded Palates in the square.