



WENTWORTH SHOW SOCIETY INC,  
PO BOX 76, WENTWORTH NSW 2648  
ABN 95 601 029 868  
www.wentworthshow.org.au

**WENTWORTH SHOW WORKING SHEEP DOG TRIAL  
ENTRY FORM 2021**

NOVICE sheep dog trial starts 8.30am Thursday 26 August  
IMPROVER & OPEN Trials to follow  
Entries close on Friday 13 August  
All enquiries to Thel O'Shea 0419 984 083  
email [thelwwshow@gmail.com](mailto:thelwwshow@gmail.com)

Handlers Name: .....

Postal Address: .....

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

Contact Name: ..... Mobile Phone: .....

Email Address: .....

NOVICE		
Dogs Name	Registration No.	Fee \$6.00
SUB-TOTAL		

IMPROVER		
Dogs Name	Registration No.	Fee \$8.00
SUB-TOTAL		

OPEN		
Dogs Name	Registration No.	Fee \$10.00
		<b>SUB-TOTAL</b>
CAMPING	Per night \$15.00 3 nights or more \$35.00	
		<b>TOTAL</b>

This trial is conducted under the rules of the SAWSDA, including the Code of Conduct as outlined in Section 7 & 8 of their Constitution. A copy of this Code of Conduct is available from the SAWSDA Secretary, & will also be displayed at the Timekeepers location at the trial. The payment by a competitor for entry into this trial is an indication of their acceptance of the SAWSDA Rules & Constitution, including the Code of Conduct, which is applicable to all activities & areas of the venue location, & any specific regulations governing the use of the grounds and buildings associated with the Trial.

I/We confirm that I have read and accept all the rules and regulations of the Wentworth Show Society as outlined in the schedule. I understand that handlers are responsible for all dog in my care and am aware of the terms and conditions enclosed therein.

**NAME** (Please print): \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

Ticketing packages are available through 123tix [www.123tix.com.au/events/wentworthshow](http://www.123tix.com.au/events/wentworthshow)

### Payment Options

Payment in full by Cheque Payable "Wentworth Show Society Inc" or Bank Transfer or direct deposit to be made to:

Bendigo Bank  
 BSB 633-000  
 Account No 108765462.  
 Reference SD & your name eg: SD - Smith, John

Completed form to be emailed to [thelwwshow@gmail.com](mailto:thelwwshow@gmail.com) or posted to - Wentworth Show Society, PO Box 76, Wentworth NSW 2648.

Office Use (Please tick appropriate boxes)

Indemnity Waiver Received

Payment Received