



Queensland Shows

Entry No.

PO BOX 240, Rocklea 4106
Ph: 07 3277 7747 Fax: 07 3277 7428
Email: admin@queenslandshows.com.au

STATE UTE MUSTER SERIES - ENTRY FORM

All Entrants must complete an Entry Form prior to Local Show Judging

Entry Form to be forwarded to Show Society Coordinator prior to designated judging date

Full Name:			
Street Address:			
Town/City:		Postcode:	
Home Phone:		Mobile Phone:	
Email:			
Vehicle	Registration No.		
Make/Model			
Vehicle Colour:	Year:	Cylinders:	
Show entered:	Sub Chamber:		
	Owner <input type="checkbox"/>	Driver <input type="checkbox"/>	

Nominated Class/es:

- | | | |
|--------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Street Ute | <input type="checkbox"/> B & S Ute | <input type="checkbox"/> Chicks Ute |
| <input type="checkbox"/> 4 X 4 Ute | <input type="checkbox"/> Work Ute | <input type="checkbox"/> Feral Ute |
| <input type="checkbox"/> Classic Ute | | |

"Any entrant providing incorrect or misleading information will be disqualified"

Nomination fee:

\$10.00 for the first Class, **\$5.00** for each additional Class *(Show level only.* **TOTAL**
There are no nomination fees for Sub Chamber or Chamber finals)

Entrants Declaration:

I have read and understood the Ute Muster Rules and agree to be bound in all respects by these Rules and the Rules and By-Laws of QCAS

☐

I have won a previous class at another local Show in the current show season: YES ☐ NO ☐

If YES Name of Show:

Name of Class:

Signature of Entrant	Date	Signature of Show Society / Sub Chamber Representative	Date
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- Email or Print and Fax/Post this Entry Form directly to the Show Society in which you will be competing
- All Show Society contact details can be found at www.queenslandshows.com.au
- False or Misleading information given by the entrant may lead to disqualification from this event and for the duration of the Competition

Show Office/Sub Chamber Coord Use Only:

Show Society Judging:

- | | |
|-----------|---|
| Winner | <input type="checkbox"/> (Fwd this form to Sub Chamber Coord) |
| Runner Up | <input type="checkbox"/> (Fwd this form to Sub Chamber Coord) |
| Placing | <input type="checkbox"/> (Retain this form for your records) |

Sub Chamber Judging:

- | | |
|-----------|--|
| Winner | <input type="checkbox"/> (Fwd this form to QCAS Office) |
| Runner Up | <input type="checkbox"/> (Fwd this form to QCAS Office) |
| Placing | <input type="checkbox"/> (Retain this form for your Records) |

ON COMPLETION OF SUB CHAMBER FINALS, IT IS THE RESPONSIBILITY OF THE HOST SECRETARY, WINNER & RUNNER UP TO FORWARD ALL RELEVANT DOCUMENTATION OF CLASS WINNERS TO QUEENSLAND SHOWS

Email: admin@queenslandshows.com.au

Post: PO Box 240, Rocklea QLD 4106