

## Malanda Small Farms Field Day ANIMAL SHED APPLICATION FORM

Ph: (07) 40 965 131 Fax: (07) 40 966 769

Email: info@malandasmallfarms.com Mail: P.O.Box 365 Malanda Qld 4885

Saturday 10<sup>th</sup> November 2018: Malanda Showgrounds

(Please Print)	
Name of Organisation / Trading Name	
Contact Person / Position	
Mobile Phone	
Email	
Postal Address	
Animal (Cattle, Sheep, Goats)	
Breed ( <i>Droughtmaster, Angus</i> )	
I require Power to my site: Yes No	
Please indicate your consent or non-consent, by placing a tick in the relevant box, to your contact details being passed on to customers. All other information will remain confidential.  Consent  Non-Consent	
Consent Non-Consen	
Public Liability Insurance:	
It is a requirement of the Malanda Small Farms Field Day that all exhibitors have Public Liability Insurance. The indemnity level should be a minimum of \$10M. In most cases, the liability policy used for your normal business will cover this event, however we suggest that you confirm this with your insurance company.	
A copy of your current Certificate of Currency is required and must accompany your Application Form.	
animals arrive at the showgrounds. All	copy of your NVD must be given to the show office when your cattle must have NLIS ear tags in their ears. Goats - meat goats have have a tattoo in their ear. Malanda Showgrounds PIC No. QIEA0822
Site Number Required: -	
Preferred site is:	Second choice is:
I note that this application for Space mapplication form does not guarantee a	nust be returned no later than Friday 26 October. Completion of this site will be available.
By signing this Application Form I conf General Conditions of Contract relatin	irm that I have read and agree to the Malanda Small Farms Field Day g to this application.
Signature:	Date:
CHECK LIST:	
Copy of my Insurance Policy Certific	ate of Currency attached
Site payment made to: Small Farm	s Field Day Account : Details BSB 633000 Acc. No. 146797261
☐ Please may I have a receipted invoice	