SHEEP ENTRIES

PLEASE COMPLETE IN BLOCK CAPITALS.

CLASS	NO. OF ENTRIES	CLASS DESCRIPTION	FEE		CLASS	NO. OF ENTRIES	CLASS DESCRIPTION	FEE

Owner _____

Address _____

_____

_____ Postcode _____

Telephone _____

Email _____

Flock No._____

Name on Cheque _____

CFFS Ltd will hold your data on file for office use only. This data will not be shared/sold.

TOTAL £_____. Cheque payable to CFFS Ltd. Please enclose payment.

County Fermanagh Farming Society Ltd. hereby reserves the right to refuse any entry without explanation. Exhibits must be delivered on the dates instructed and conform to the directions of the Schedule of Prizes otherwise Exhibits will not be accepted.

In signing this certificate I confirm its contents are true to the best of my knowledge and belief and I hereby agree to conform to the Rules of CFFS Ltd. I understand that Entry Fees are non-refundable. **I give permission for my data to be used by CFFS Ltd for office use only.**

UNSIGNED ENTRY FORMS WILL BE DISREGARDED.

Signed _____ Date _____

Exhibitor Reference Number _____

(If you are a new exhibitor a reference number will be assigned upon receipt of entries)