



Kalbar Show Society

2017 DAIRY PRODUCE SCHEDULE 10

Kalbar & District Agricultural & Pastoral, Sport & Recreation Association Inc
PO Box 38, Kalbar Qld 4309
PH 07 5463 7360 (office)
0419 176 295 (Secretary)
kalbarshow@outlook.com
www.kalbarshow.net.au

SECTION 10 – DAIRY PRODUCE

STEWARD: Mrs A. Miller (07) 5463 8030

RULES

1. All competitors must pay admission fees.
2. All entries close at 9.30am on judging day.
3. Judging to commence at 10:00am on Friday, June 23RD 2017.

ENTRY FEE: \$1-00 each class.

PRIZE MONEY: First \$5.00, Second \$3.00, Third \$2.00

POINTS: First 3 points, Second 2 points, Third 1 point, Champion 3 points, Reserve Champion 2 points.

Grand Champion 4 points.

PLEASE NOTE: Classes 1-2, 500g bottles. Honey bottle size only.

Classes 1-3 judged on flavour and cleanliness.

Class 4-11 must be clean and in egg cartons.

Class.

1. 500g Fresh Cows Milk.
2. 500g Fresh Cream.
3. ½ kg Fresh Homemade Butter.

VOUCHER, CARD AND SASH FOR CHAMPION AND RESERVE CHAMPION IN CLASSES 1-3.

4. 1 doz. Hen Eggs – Any Color, Judged on weight (Double Yolks debarred).
5. 1 doz. Brown Hen Eggs.
6. 1 doz. White Hen Eggs.
7. 1 doz. off White or Off Brown Hen Eggs.
8. 1 doz. Hen Eggs – 6 Brown and 6 White.
9. 1 doz. Bantam Eggs.
10. 1 doz. Duck Eggs.

11. **KALBAR SHOW SPECIAL** – Heaviest Hen Egg, Judged on Weight (Entry to be displayed on a saucer).

VOUCHER, CARD AND SASH FOR CHAMPION AND RESERVE CHAMPION EGGS IN CLASSES 4-11.

VOUCHER FOR GRAND CHAMPION EXHIBIT IN THE DAIRY PRODUCE SECTION.

VOUCHER AND CARD FOR MOST SUCCESSFUL EXHIBITOR IN THE DAIRY PRODUCE SECTION.

DAIRY PRODUCE ENTRY FORM

Name of Exhibitor:			
Exhibitor Address:			
Suburb:		State:	P/Code:
Phone No. (B/H):		Phone No. (A/H):	
Fax:		Mobile No.:	
Email Address:			

All entries MUST be received prior to the closing date specified in the appropriate schedule. Entry fees must either accompany the submission of the entry form.

Class No	Description of Entries	Entry Fee	No of Entries	Total	Office Use Pen No.

Exhibitor Statement of Compliance: Waiver, Release Form Attached Yes/No

Subject to the by-laws and regulations of the Queensland Chamber of Agricultural Societies, except where such may be modified or added by-laws and regulations of the Kalbar Show Society, all of which are deemed herein as if included and inserted at full length. I, the undersigned make the following entries for the forthcoming show and confirm the entries as being my bone-fide property

I hereby acknowledge that the policies contained within this application have been read and understood and all care has been taken to adhere to their governance.

Signature:.....

Name:.....

Date:.....

Waiver, Release and Acknowledgement Form

Clarification of Terms

In this waiver, release and acknowledgement form, "the society" means and includes:

- a) All affiliated entities;
- b) Servants or agents of the society and / or all affiliated entities;
- c) Employees of the society and / or all affiliated entities;
- d) Members of the society and / or all affiliated entities;
- e) Volunteers of the society and / or all affiliated entities.

Declaration of Event Participant

1. I hereby acknowledge that it is a condition of participating in the event that I do so at my own risk. I accept all risks and release the Kalbar & District Agricultural & pastoral Association Inc, sometimes referred to as The Kalbar Show Society and from this point on referred to as "the society", from all claims, demands and proceedings arising out of or connected in any way with my participation in the Event. I indemnify them against all liability for any injury, loss or damage to myself or my property arising out of or connected with my participation in the Event. This release continues forever and binds all of my heirs, successors, executors, personal representatives and assignees.
2. I acknowledge that it is a condition of participating in the Event that the Society and any person or body directly or indirectly associated with the Event are absolved from all liability arising from injury or damage to myself or my property howsoever caused arising out of participation in the Event whatsoever whether due to any negligent act, breach of duty, default and/or omission on the part of the Society and any person or body directly or indirectly associated with the Event, or otherwise.
3. I acknowledge that any person participating in the Event is only allowed to do so on the distinct understanding that they do so at their risk.
4. I acknowledge that participating in the Event may involve a real risk of serious injury or even death from various causes. I accept all risks necessarily flowing from participating in the Event.
5. I acknowledge that the Society relies on the information provided by me and state that all such information is accurate and complete.
6. I acknowledge the difficulties of participating in the Event and warrant that I am physically fit to participate in the Event and that I have not been advised otherwise by a qualified medical practitioner. I acknowledge that I must disclose any pre-existing medical or other condition that may affect the risk that either myself, or any other person will suffer injury, loss or damage.
7. I acknowledge that it is a condition of participating in the Event that I follow the instructions of the Society and any person directly or indirectly associated with the Event at all times. I indemnify and keep indemnified the Society and any person or body directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with a failure by me to comply with rules and/or directions given to me by the society and any person or body directly or indirectly associated with the Event.
8. I indemnify and keep indemnified the Society and any person or body directly or indirectly associated with the Event against all claims made by any other person for injury or damage howsoever caused arising out of participation in the Event, whether due to any negligent act, breach of duty, default and/or omission on the part of the Society and any person or body directly or indirectly associated with the Event, or otherwise.

I ACKNOWLEDGE THAT I HAVE READ THIS FORM OR THAT IT HAS BEEN EXPLAINED TO ME. I FULLY UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED THE DOCUMENT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Signature:

Date:

.....

Print Name in Full:

.....

Declaration of Minors

Note: Should the participant be under the age of 18 years on the event day, their parent or guardian is required to sign this additional declaration.

1. I certify that I am the parent / guardian of, who will be years of age on the day of the event, and has trained for and has my consent to participate in the event. I testify that I have read the above and acknowledge acceptance of the stated conditions on behalf of the minor specified above.
2. In consideration of the facilities provided to us, I, my executors, administrators and assignees and for the child / under age person, absolutely release and discharge the society and any person directly or indirectly associated with the Event from all claims, demands and proceedings arising out of or connected with participation in the Event that I or the child / under age person may suffer or sustain. I hereby indemnify and agree to keep indemnified the Society, and any person or body directly or indirectly associated with the Event against all claims whatsoever by me or the child / under age person claim through me or through the child / under age person in any way arising out of or connected with and this discharge may be pleaded in bar to any such claims.

I ACKNOWLEDGE THAT I HAVE READ THIS FORM OR THAT IT HAS BEEN EXPLAINED TO ME. I FULLY UNDERSTAND ITS TERMS AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED THE DOCUMENT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Signature of Parent / Guardian:

Date:

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Parent / Guardian's Full Name:

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Parent / Guardian's Address:

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Contact No.:

.....

OFFICE USE ONLY

Date Processed:		Date Form Received:	
Processed By:		Date Customer Notified:	