

Livestock & Entries Office
 Yorkshire Agricultural Society
 Great Yorkshire Showground
 Harrogate
 North Yorkshire
 HG2 8NZ

Tel: 01423 546236

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Reg. Charity No. 513238



EXHIBITOR TICKET ALLOCATION
 (see Regulation 16 in the schedule)

Exhibitors will receive **ONE** x 1-day pass for every £10 spent in entry fees.

Additional tickets can be purchased at the reduced rates shown below.

Exhibitor Name:

Address:

Postcode: Tel. No:

Prize Cheques to be made payable to:

WOOL FLEECE ENTRY FORM

ENTRIES CLOSE THURSDAY 18 MAY

Each exhibit to consist of one fleece of 2010 clip and must have been grown on sheep the property of the exhibitor.

Class No.	Class Name	No. of Entries
719	Beltex	
720	Blackface	
721	Bluefaced Leicester	
722	Bleu du Maine	
723	British Charollais	
724	British Vendeen	
725	Dalesbred	
726	Derbyshire Gritstone	
727	Hebridean	
728	Herdwick	
729	Jacob	

Class No.	Class Name	No. of Entries
730	Lincoln	
731	Lleyn	
732	Lonk	
733	Masham	
734	Mule	
735	North Country Chev.	
736	Rough Fell	
737	Ryeland	
738	Shetland (White Fleece only)	
739	Shetland (Moorit Fleece only)	
740	Shetland (Black Fleece only)	

Class No.	Class Name	No. of Entries
741	Shetland (Any Other Colour)	
742	Swaledale	
743	Teeswater	
744	Texel	
745	Wensleydale	
746	Whitefaced Woodland	
747	Zwartbles	
748	Any Other Pedigree	
749	Down Breeds	
750	Natural Coloured Lowland	
751	Natural Coloured Hill	

Entry Fees	entry fees are £2.50 per entry	Total Number of Entries							
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Advance Tickets If you would like to purchase any additional tickets at the reduced rates, see below. Please indicate the number required.									
Child £8.00	<input type="text"/>	Adult £18.00	<input type="text"/>	Concession £17.00	<input type="text"/>	Family £47.00	<input type="text"/>	<input type="text"/>	<input type="text"/>

A VAT receipt will be sent with your tickets	VAT Reg. No. 613 0480 81	GRAND TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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By signing below, you agree to abide by the Rules and Regulations of the YAS, and any relevant governing body to which it affiliates.

Date: _____

Exhibitor Signature: _____

Credit Card Payment: Mastercard Visa Switch

Card No:

Expiry Date: __ __ / __ __ Start Date: __ __ / __ __ Card Issue No: __ __
 (switch only)

Name of Cardholder: _____