



2025 CATTLE ENTRY FORM & MEMBERSHIP RENEWAL

OFFICE USE	
S/B	
SE	
W/B	
C/P	

EXHIBITOR NAME:

ADDRESS:

POSTCODE: E-MAIL:

TELEPHONE NO: MOBILE NO:

MAIN FARM CODE: PROPOSED HAULIER:

ALL CATTLE (INCLUDING CALVES) ATTENDING THE SHOW MUST COME FROM A HERD THAT IS FULLY ACCREDITED FREE OF BVD OR THEY MUST ALL BE INDIVIDUALLY TESTED FREE OF VIRUS (ANTIGEN) WHETHER OR NOT THEY HAVE BEEN VACCINATED, IN ACCORDANCE WITH CHECS RULES (WWW.CHECS.CO.UK)

PLEASE STATE IF HERD IS:

• **BVD ACCREDITED** (PLEASE SEND COPY CERTIFICATION) ☐

• **NOT ACCREDITED** (CONFIRM CATTLE WILL BE TESTED AND RESULTS WILL BE SENT PRIOR TO THE SHOW) ☐

PLEASE COMPLETE ENTRY DETAILS ON REVERSE

- FOR ALL ANIMALS
- FOR YOUNG HANDLERS INCLUDE THEIR NAME, DATE OF BIRTH & BREED OF CATTLE BEING SHOWN
- PLEASE NOTE ANIMAL SHOWN BY YOUNG HANDLER MUST HAVE BEEN ENTERED IN PREVIOUS CLASSES
- THERE WILL BE NO YOUNG HANDLERS ENTRIES ON THE DAY

	NO OF ENTRIES	TOTAL £
CATTLE ENTRY: <i>Members: £6.00 Non-Members: £12.00</i>		
ANNUAL MEMBERSHIP FEE: <i>£40.00 per Member</i>		
FIRST AID FEE: <i>£1.00 Per Handler/Exhibitor</i>		
	TOTAL	£

Please make payments by (Tick box to indicate which payment method used):

☐ **BACS:** Sort code: 82 68 22 Account Number: 60110578

PLEASE ADD A REFERENCE TO YOUR BACS PAYMENT: NAME, CAT

☐ **Credit/Debit Card:** by calling the Show Office on 01888 562219

(PAYMENT REFERENCE EXAMPLE: JOHN DOE, CAT)

☐ **Cheque** made payable to "Turriff District Agricultural Association"

☐ **OR ENTER ONLINE AT:** www.turriffshow.org

PRIZE MONEY WILL BE PAID TO YOUR NOMINATED ACCOUNT – PLEASE PROVIDE BANK DETAILS

ACCOUNT NAME:

ACCOUNT NUMBER: SORT CODE:

Please tick box if you wish to donate your Prize Money to the Association ☐

Please return (along with the correct fee) to:

Entries, Turriff District Agricultural Association, The Haughs, Queens Road, Turriff, AB53 4EF

Email: entries@turriffshow.org Tel: 01888 562219

ENTRIES CLOSE: SATURDAY 14TH JUNE 2025

NO LATE ENTRIES ACCEPTED



PLEASE COMPLETE FOR ALL ENTRIES *(Entries are not required for Special Prizes)*

FOR YOUNG HANDLERS PLEASE INCLUDE THEIR NAME, DATE OF BIRTH AND THE BREED OF CATTLE BEING SHOWN

CLASS NUMBER	DESCRIPTION e.g. BULL, HEIFER	EAR TAG NUMBER	DATE OF BIRTH	NAME OF ANIMAL	NAME & NUMBER OF SIRE (for Pure Bred Cattle)	NAME & NUMBER OF DAM (for Pure Bred Cattle)	EXHIBIT NO (FOR OFFICE USE)

PLEASE REVISE THIS ENTRY CAREFULLY & MAKE SURE ALL PARTICULARS ARE CORRECT IN ACCORDANCE WITH THE SCHEDULE BEFORE SENDING.

I/We hereby agree to abide by the Association Rules and Regulations relating to the exhibition of livestock and at all times pay due regard to Bio-security requirements and the Health & Safety of the public attending the event. All exhibitors must be covered by their own public liability insurance and all accidents must be reported to the section convenor.

All animals to be exhibited are my own property and the details provided are accurate to the best of my knowledge. (Young handlers need not be the owner of their exhibit).

SIGNATURE: DATE:

All data and personal information provided will be stored, processed and retained by the Association for the purpose of running the show and communicating with members in the future.

*Please indicate if you wish to receive correspondence **by POST** ☐ or **E-MAIL** ☐*