



SLS Mid North Coast Branch Out of Branch Carnival Entry Form



CARNIVAL: _____

ENTRIES FROM: _____ **SLSC** **DATE:** _____

	COMPETITORS NAME		Award Name	Award Number	Expiry Date
	First Name	Surname			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
Total Number of Competitors					

I certify that the above competitors are registered and financial members of the Club.

Name _____

Signature _____ **Date** _____

Endorsed by Branch

Name _____

Signature _____ **Date** _____

Required when competing in Carnivals outside the Branch