



COOMA PASTORAL & AGRICULTURAL ASSOCIATION
COOMA SHOW 2025
ELDERS COOMA FARMER CHALLENGE ENTRY FORM

NAME OF TEAM: _____

CONTACT NO: _____

INDICATE * OPEN * JUNIOR
 (Under 18 yrs require parent/guardian signature)

TEAM MEMBER NAMES	AGE	WAIVER ✓	PARENT PERMISSION Name parent/guardian signature
1			
2			
3			
4			

Once completed email your entry form and signed waivers to coomashowart@outlook.com