

Show Name:

Show Date:

Name:

Address:

Post Code:

Telephone:

Number of Exhibits:

Registration Body:

Membership Number:

Number	Details	Price	Total	I/we hereby certify that (a) I/we are financial members of a recognized registering body (with the exception of exhibitors of companion cats); (b) the pedigree cats entered are registered in my/our name with a registering body (FCCWA, interstate and overseas exhibitors are requested to attached a copy of the exhibits registration certificate); (c) where a registration, transfer or lease is 'pending' all papers have been lodged with the relevant registering body; (d) the cats are eligible for the classes entered; (e) all exhibits have a current certificate of vaccination against Feline Infectious Enteritis; (f) I/we enter the cats at our own risk; (g) I/we agree to observe and be bound by the rules & regulations of COAWA & accept their decision as final.
	Classes			
	Classes			
	Classes			
	Double Cages			
	Exhibit Only Cages			
	Catalogue			
	Advert in Catalogue			
	Stall			
	Donation to Trophy Fund			
Total				

Signed

Date:

Payment method

Cheque / money order

Direct deposit **you must use your first initial and last name as the description for the deposit.** We will not be able to track payments without descriptions in this format.

Date of Payment: _____

Description used: _____

Cat/Kitten Name:			
Breed:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neuter <input type="checkbox"/> Spey	
Colour/Pattern:		Date of Birth:	
Reg No :			
Sire:			
Colour/Pattern:		Reg No:	
Dam:			
Colour/Pattern:		Reg No:	
Breeder:		Large Cage: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Classes	<i>Main Class</i>	<i>Side Classes</i>	
COAWA Cat of the Year (Adults only)		COAWA Kitten of the Year	

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Reg No :			
Sire:			
Colour/Pattern:		Reg No:	
Dam:			
Colour/Pattern		Reg No:	
Breeder:		Large Cage: <input type="checkbox"/> Yes <input type="checkbox"/> No	
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