The Cake Decorators' Association of SA Inc

Entry Form for the 2024 State Competition

Friday 5th July to Sunday 7th July 2024





Goyder Pavilion, Adelaide Showgrounds

Entries must be received by Wednesday 5th June 2024

Please note: Competitors, one entry only per class. All work to be the bona fide unaided work of the competitor only.

Entry cost per Class: Adult \$10.00 - Junior \$5.00

Entry Details:

| Entry Details. | | | | |
|---|---|---|--|-------|
| Section | | Class | | Fee |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | Total: | \$ |
| Your Details: | | | | |
| Your Name: | | | | |
| Your Address: | | | | |
| | | | Postcode | |
| Your phone: | (mobile preferred) | | | |
| Email address: | | | | |
| CDASA Member ☑: | ☐ Yes – You | ır Branch: | | |
| EFT Payment details: (Please pay by 5/06/2024) | Account Name: CDASA Inc Reference: Exhibitor's name Amount: \$ Date Paid:/2024 Email a scanned or clear photograph of a signed entry form together you're your payment receipt to Mrs Carol Davis: c49k44@bigpond.com | | | |
| Cheque Payment details: | Payable to: Cake Decorators Association of SA Inc | | | |
| (Please pay by 5/06/2024) Post this form & your cheque to: | Post to: | 17 l | Carol Davis Homington Road, Elizabeth North | |
| ., | Amount: | mount: \$ Date Paid:/2024 Allow time to be received by 5 th June | | |
| I agree to abide by the Rules and Conditions of the competition and acknowledge that the judges' decision is final, and no correspondence will be entered into. I give permission for the entries listed on this form to be photographed and may be used by CDASA for reporting and promotional purposes. Judges' score and comment sheets MAY NOT be published on any Social Media platform by either party. | | | | |
| Competitor's and/or Guardian's (for junior entries) Signature: | | | Date: /_ | /2024 |
| Entries must be received by Wednesday 5 th June 2024 | | | | |