



**COOMA PASTORAL & AGRICULTURAL ASSOCIATION**  
**COOMA SHOW 2024**  
**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 [secretarycpaa@outlook.com](mailto:secretarycpaa@outlook.com)