



First & Surname(s)		I understand and accept; 1) the conditions of entry as shown on pages 2-8	
Trading Name (if applicable)		2) that the "Name of oil" as shown for each entry is what will be printed on certificates & in the results.	
Postal Address		Signature :	
Suburb/Town:		State:	Post Code:
Telephone:		E-mail:	Nearest town(s) to your grove(s)
Payment method (please tick) <input type="checkbox"/> Cheque or money order or <input type="checkbox"/> On-line funds transfer to BSB 182-512 A/c 97255-4596. made payable to West Australian Olive Council Inc. Please include your Trading name or Surname so we can identify you <input type="checkbox"/> Visa / Mastercard (pls circle) _____ exp ____/____ CVV _____ A 2.2% surcharge is payable on credit card payments			
Number of entries		(Please refer to page 8 for entry costs)	
Classes 1 to 4 (max. of 5)	1st entry	@ \$.....ea = \$.....	Tick if paid up member <input type="checkbox"/>
	subsequent entries	@ \$.....ea = \$.....	
Class 5 (max. of 5)	1st entry	@ \$.....ea = \$.....	TOTAL PAYABLE = \$
	subsequent entries	@ \$.....ea = \$.....	

Your ID Code	Class Entered 1 to 5	Volume produced of this oil (litres)	Name of oil Please print exactly what you would like displayed in the results booklet & certificate to identify your oil.	Olive Variety(s) For blended oils please list in descending order of volume OR Flavour of Oil for Class 5	Name of Processor