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Club Challenge Class Return Form

Society Name Date of Open Show.....

Nominated Class Number in Class

Show Secretary Name Address

Show Secretary Signature.....

Phone No:

FIRST PLACE

SECOND PLACE

Name Name.....

Address Address

.....

Phone No: Phone No:

Society Society

Exhibit Name Exhibit Name

Points Points

THIRD PLACE

FOURTH PLACE

Name Name.....

Address Address

.....

Phone No: Phone No:

Society Society

Exhibit Name Exhibit Name

Points Points

JUDGE

Please complete the above details as soon as possible after your Open Show and return to the address shown at the top of this Form. Details may also be returned via the email address.

DO NOT RETURN THIS FORM TO THE FBAS TROPHY OFFICER