

SECTION 6 – JUNIOR & DISABILITY FINE ARTS 2026 ENTRY FORM

OFFICE USE ONLY
DATE FORM RECEIVED
____/____/2026
RECEIVED BY:

PLEASE FORWARD ENTRIES TO:

✉ **MAIL:** TPA & IA, P.O. BOX 5064 MC, Townsville QLD

✉ **EMAIL:** 4810 townsvilleshownoms@gmail.com

👤 **DELIVER TO:** Townsville Show Office, 72 Ingham Rd, West End QLD

PLEASE NOTE - ONE PERSON PER ENTRY FORM

Artist Name: _____
DOB: _____
Address: _____ Post Code: _____
Email: _____
Contact Name & Phone No: _____
Parent/Guardian/Care Giver Name: _____
Relationship to Artist/ Entrant: _____

I hereby agree to abide by the conditions of entry as printed in the fine arts schedule which I have read and understood.

SIGNATURE: _____ DATE: _____
(parent/guardian/caregiver to sign if entrant is under 18yrs of age or intellectually impaired & unable to legally sign)

Class No.	Artwork Title	Description	OFFICE USE ONLY	
			Artwork Received	Artwork Collected

ALL ARTWORK IS TO BE DELIVERED TO THE TOWNSVILLE SHOW OFFICE BY NO LATER
THAN 4:00PM ON FRIDAY THE 5TH JUNE 2026.

