

INSTRUCTIONS

Please complete form and return to:
 Canterbury A&P Association, PO Box 9002, Tower Junction, Christchurch 8149, or email to bindy@theshow.co.nz
PLEASE NOTE: Completed forms need to be returned as soon as possible or no later than Friday 20 September 2019,
 you will then be sent a GST invoice for payment within 7 days. Tickets will be sent out mid/late October.

SCHOOL GROUP DETAILS

Organisation Name _____

Address _____

Town/City _____ Postcode _____

Phone _____ Mobile _____

Contact Name _____

Email _____

Please note: You must provide an email address in order to receive your tickets.

TICKET REQUIREMENTS - Please indicate the number of tickets you require for the 2019 New Zealand Agricultural Show

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|--|--|----------------------|--------------------------------|--------------------------------|---|----------------------|-----------------|----------------------|------------------------------|----------------------|-----------------|----------------------|---------------|----------------------|------------------|----------------------|-------------------|--|--|----------------------|--|
| <table style="width: 100%;"> <tr> <td style="width: 15%;">Pre-school children (under 5 years)</td> <td style="width: 10%;"><input type="text"/></td> <td style="width: 20%;">@ no extra charge =</td> <td style="width: 10%;"><input type="text" value="0"/></td> </tr> <tr> <td>Primary & Intermediate School Children</td> <td><input type="text"/></td> <td>@ \$5.00 each =</td> <td><input type="text"/></td> </tr> <tr> <td>Secondary School Children</td> <td><input type="text"/></td> <td>@ \$7.00 each =</td> <td><input type="text"/></td> </tr> <tr> <td>Adult tickets</td> <td><input type="text"/></td> <td>@ \$14.00 each =</td> <td><input type="text"/></td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL \$ =</td> <td><input type="text"/></td> </tr> </table> | Pre-school children (under 5 years) | <input type="text"/> | @ no extra charge = | <input type="text" value="0"/> | Primary & Intermediate School Children | <input type="text"/> | @ \$5.00 each = | <input type="text"/> | Secondary School Children | <input type="text"/> | @ \$7.00 each = | <input type="text"/> | Adult tickets | <input type="text"/> | @ \$14.00 each = | <input type="text"/> | TOTAL \$ = | | | <input type="text"/> | <p>Please indicate which day your group will attend The Show</p> <p><input type="checkbox"/> Wednesday 13 November 2019</p> <p><input type="checkbox"/> Thursday 14 November 2019</p> <p>Estimated arrival time: _____ pm/am</p> <p>* Please indicate if the of your group will be arriving by bus or car. (Buses enter via Curletts Road)</p> <p><input type="checkbox"/> Bus</p> <p><input type="checkbox"/> Car <input type="text"/> No. of car passes needed</p> <p style="font-size: small;">Free parking is available to all vehicles transporting School Groups to the site. If your Group is arriving by bus , we can also provide parking passes for accompanying vehicles.</p> |
| Pre-school children (under 5 years) | <input type="text"/> | @ no extra charge = | <input type="text" value="0"/> | | | | | | | | | | | | | | | | | | |
| Primary & Intermediate School Children | <input type="text"/> | @ \$5.00 each = | <input type="text"/> | | | | | | | | | | | | | | | | | | |
| Secondary School Children | <input type="text"/> | @ \$7.00 each = | <input type="text"/> | | | | | | | | | | | | | | | | | | |
| Adult tickets | <input type="text"/> | @ \$14.00 each = | <input type="text"/> | | | | | | | | | | | | | | | | | | |
| TOTAL \$ = | | | <input type="text"/> | | | | | | | | | | | | | | | | | | |

PAYMENT - please indicate your chosen payment method

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| <p><input type="checkbox"/> CHEQUE (enclosed) *Please pay by ONE cheque per group *Payable to the Canterbury A&P Association</p> | <p><input type="checkbox"/> DIRECT CREDIT: Name: Canterbury A&P Association Number: BNZ Account Number: 020800 0039982 00 Reference: School Group Tickets/Name of your group.</p> <p style="font-size: small;">*Please ensure you still post or email your ticket order form when paying by direct credit.</p> |
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Tax Invoice Number: 10-413-184
 (Please copy this form for your records)

DECLARATION

By signing below, you agree to the following:

- * **There will be no refunds issued for unused tickets**
- * Tickets will be issued once your payment has been received . We will send these out via email in mid/late October.
- * You will be required to print these tickets and present these to the gate staff to be scanned.
- * Discounted tickets are not available for purchase at the Show Gates.

(Normal admission prices of \$28 per adult, \$18 per secondary school student and \$10 per child will apply for gate sales)

Signed _____ Date _____

Name _____ Position _____