

<h2 style="margin: 0;"><i>Sydney Stamp & Coin Expo 2025</i></h2> <p style="margin: 5px 0;"><i>Thursday 20 March to Sunday 23 March 2025</i> The Grandstand of the Wentworth Park Sporting Complex</p> <h3 style="margin: 0;">ENTRY FORM</h3> <p style="margin: 5px 0;">(Entries close Thursday 21 November 2024)</p> <p style="margin: 5px 0;">Send the completed entry form by email to glewis@custom-made.com.au or by mail to PO Box 196, Randwick NSW 2031 Website: www.sydney2025.com.au</p>	<div style="border: 1px solid black; text-align: center; padding: 2px;">Office Use</div> <p>Initial Entry No:</p> <p>Final Entry No:</p> <p>Frame Nos:</p> <p>Class:</p>
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Surname	Preferred Given Name	Date of Birth
		(Youth entries only)
Address	State	Postcode
Telephone	Email	

DETAILS OF EXHIBIT	FIP/APF Class.....	No of Frames.....
Exhibit Title		
Short Description for Exhibition Catalogue (20-50 words)		
.....		
.....		
.....		
Australasian Philatelic Challenge <input type="checkbox"/> (Please tick if part of a team)		
Awards of this exhibit at previous Exhibitions (Name of exhibition, year and medal level)		
1.		
2.		
3.		
A DRAFT TITLE PAGE MUST BE INCLUDED WITH THIS FORM.		
Sheet height (including protector) to be no greater than 285mm.		

DECLARATION
I accept the rules and regulations for National Exhibitions run under the auspices of the APF. I agree to the APF retaining my entry information in their on-line database, as per https://apf.org.au/privacy-statement/ The entry is my own property.
Signature
Date
My exhibit will be delivered by: Self Other (please specify)
My exhibit will be returned by: Self Other (please specify)
Entries must be in the hands of the Exhibition Commissioners in time to be delivered to the exhibition venue by the early morning of 19 March 2025.

PAYMENT DETAILS	Entry Fee - \$70 for each frame \$.....
	Donation \$.....
	Total \$.....
<input type="checkbox"/> I enclose cheque/money order for the above amount, to be made payable to Philatelic Association of NSW	
<input type="checkbox"/> Direct Deposit to Philatelic Association of NSW , BSB 082-088 Account 584006915. Please put your name on the transfer	
<input type="checkbox"/> Please charge my MasterCard/Visa:	
Card No _____	Expiry date
Name as on card (please print)	Signature
	Date