



QUEENSLAND FELINE ASSOCIATION Inc.
Show Report

QFA Inc. REPRESENTATIVE:

NAME OF SHOW:

HELD AT:

DATE.....

(Circle one as applicable)

DID THE JUDGES/ASSIGNMENTS DIFFER FROM THE SCHEDULE? YES/NO

COMMENTS.....

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DID JUDGING TAKE PLACE IN A SUITABLE LIGHT? YES/NO

WAS THE SIZE OF THE HALL ADEQUATE FOR THE NUMBER OF ENTRIES? YES/NO

WAS THE SHOW COMPLETED AT A REASONABLE TIME? YES/NO

COMMENTS.....

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WERE CATERING FACILITIES ADEQUATE FOR ALL? YES/NO

WAS THE SHOW CONDUCTED WITHIN NORMAL SHOW PROCEDURES? YES/NO

WERE THE AWARDS AS SHOWN IN THE SCHEDULE PRESENTED? YES/NO

COMMENTS.....

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BFL CATS

NAME OF CAT

REG. NO

OWNED BY

NAME OF CAT	REG. NO	OWNED BY

GENERAL REMARKS:

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.....
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Signed: Date:
QFA Inc. SHOW REPRESENTATIVE

CLUB:

To be emailed to Secretary within 7 days

QFA Secretary
secretary@qfeline.com
Phone 0433 951013