

**DOVER & DISTRICT BEEKEEPERS' ASSOCIATION
HONEY SHOW & COMPETITION**

CLASS N°	DESCRIPTION OF ENTRY	N° OF ENTRIES

Name:

Association:

Address:

.....

.....

Please enclose a stamped self-addressed envelope.

Composite Class N°		
Entry N°		
Please tick 3 items	<input checked="" type="checkbox"/>	Points
Light Honey	<input type="checkbox"/>	<input type="checkbox"/>
Med/Dark Honey	<input type="checkbox"/>	<input type="checkbox"/>
Granulated/Soft Honey	<input type="checkbox"/>	<input type="checkbox"/>
Beeswax	<input type="checkbox"/>	<input type="checkbox"/>
Frame	<input type="checkbox"/>	<input type="checkbox"/>
Related Article	<input type="checkbox"/>	<input type="checkbox"/>
Total Points		<input type="checkbox"/>

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