ENTRY FORM FOR SOMERSET COUNTY GUY FAWKES CARNIVALS ASSOCIATION LOCAL CLASSES

WELLS CITY CARNIVAL FRIDAY 14th NOVEMBER 2025

Completed entry form received

Name of C Entrant	lub /										
Title of Ent	ry										
Club Town of Origin				act Name for espondence							
Address fo Correspond	-										
Post Code		Telephone Number(s)									
Email											
Please supply a contact and telephone number in case of a problem during the Line up			Number			Name					
Estimated dimensions of entry		Height		5.00M maximum	Length		30.5M maximum	Width		5M aximum	
Wells City Carnival – Local Classes											
Ple	ease se	elect the cl	ass that y	ou wish t	to enter b	y placing a	tick (or cr	oss) in the	relevant box	ζ.	
Local Classes	Descrip	iption									
17	Trade –	- Open, Entrance Fee £100									
18	Trade –	de – Local (10 mile radius of Wells), Entrance Fee £90									
19	19 By invitation – Bands & Any Non Competitive entries – please describe the nature of your entry below:										
Description:											
20	By invitation – Collection Vehicle										

For Motorised Entries: -

- My/Our entry will have adequate Public Liability Insurance cover in place for the Town Carnival procession and acknowledge that the Town Committee will not accept responsibility for any claim made against you.
- Any motorised vehicles used by my entry will be insured for CARNIVAL USE and comply with any current regulations.
- Our entry (where applicable) will have a VSO (Vehicle Special Order),
- All relevant documentation will be available for inspection if required.
- You should read the full Conditions of Entry that apply to your entry, available on the County website before submitting an entry.

For All Entries: -

- I understand that this is an entry form for the Wells City Carnival only.
- I agree on behalf of my entry that we will abide by the above conditions and have checked that the form has been correctly filled out.

Signed	Print		Position	
	name	ļ	in Club	

Somerset County Guy Fawkes Carnivals Association - Non Competitive Classes

THIS ENTRY FORM IS FOR NON COMPETITIVE SPECIAL CLASSES - BY INVITATION ONLY

Prior to filling in this form you need to contact the Entries Secretary below and confirm if your entry will be accepted, failure to do this will most likely mean your entry is rejected.

If your entry is rejected you will be advised by email providing you have supplied an email address. If applicable cheques should be made out to Wells City Carnival or by BACS to:

Account No.: 00521555 - Please state entry name on BACS Payments. Sort Code: 30-99-29

Return this form to:

Tony Frazier, 2 Wilton Close, Street, Somerset BA16 0SZ Tel: 01458 445652 Mobile: 07488 275849 Email: tonyelaine1@sky.com

Closing Date For **Entries 1st September** 2025