



FORAGE LAB AUSTRALIA

Powered by Cumberland Valley Analytical Services USA

Forage Lab Australia
at ACE Lab Services
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FOSTER SHOW SUBMISSION FORM

Foster & District Agricultural Show *Show Price: A1 Plus \$63.00 + GST*

FARM NAME:		DATE SAMPLE COLLECTED:	
CONTACT NAME:		MOBILE:	
ADDRESS:			
PHONE		FAX:	
EMAIL:			
COPY TO: fostershow@gmail.com			
SAMPLES			
SAMPLE REFERENCE <i>E.g. "Sample 1" or "Joe's silage"</i> Same as sample bag	SAMPLE TYPE <i>e.g. Vetch Hay, Ryegrass Pasture, Oaten Silage, Barley grain.</i>	TEST CODE <i>(see price list)</i> A1 = standard NIR in Bendigo A1 Plus = Silage NIR in Bendigo	
1.		<input type="checkbox"/> A1 <input type="checkbox"/> A1 Plus	<input type="checkbox"/> A1 & DCAD <input type="checkbox"/> Other/s: _____ <input type="checkbox"/> Yeast & Mould Count
2.		<input type="checkbox"/> A1 <input type="checkbox"/> A1 Plus	<input type="checkbox"/> A1 & DCAD <input type="checkbox"/> Other/s: _____ <input type="checkbox"/> Yeast & Mould Count
3.		<input type="checkbox"/> A1 <input type="checkbox"/> A1 Plus	<input type="checkbox"/> A1 & DCAD <input type="checkbox"/> Other/s: _____ <input type="checkbox"/> Yeast & Mould Count
4.		<input type="checkbox"/> A1 <input type="checkbox"/> A1 Plus	<input type="checkbox"/> A1 & DCAD <input type="checkbox"/> Other/s: _____ <input type="checkbox"/> Yeast & Mould Count
5.		<input type="checkbox"/> A1 <input type="checkbox"/> A1 Plus	<input type="checkbox"/> A1 & DCAD <input type="checkbox"/> Other/s: _____ <input type="checkbox"/> Yeast & Mould Count
PAYMENT			
Payment details: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> ACE Laboratory Services Account holder			
I hereby authorize ACE Laboratory Services to debit my nominated credit card with the amount that relates to the testing I have requested on this form, including GST. I am aware all credit card transactions incur a 1.5% surcharge. A transaction receipt for all credit card payment will be emailed to you automatically. Please tick if you require a tax invoice for credit card payments <input type="checkbox"/>			
Company Name _____		Name of Holder _____	
Card Number _____ / _____ / _____ / _____		Expiry Date ____ / ____ CCV _____	
Amount \$ _____		Signature _____	
Email For receipt _____ (or "as above")			