CKCSC, USA, OFFICIAL ENTRY FORM

The term "dog" applies to both sexes. Please type or print and complete in full. Use a separate entry form for each dog entered.

Show Giving Club(s)	Cavaliers of the Northeast		Check off day(s)/event(s) entries:		
Dates of Show	June 6-9, 2019		Thur Fri Sat Sun		
Closing Date (Postmark):	Friday, May 17, 2019				
Closing Date (Electronic):	NO	Sweepstakes: Conformation			
Late Entries Accepted?	NO	Obedience:	N/A N/A N/A		
•	t to \$15 late entry fee unless entry correction/comple		<u>N/A</u> <u>N/A</u> <u>N/A</u> N/A		
received prior to postmark closing.	Late entries accepted only as stated on this entry for	m. All Agility:	<u>N/A</u> <u>N/A</u> <u>N/A</u> <u>N/A</u>		
	LL ENTRY FEE. If the check does not clear, entries		andling:		
show will be refused/rejected. A por cover show operating expenses.	rtion of regional show fees are paid to the CKCSC, U	wake check	or Money Order in U.S. funds		
		only payabl	e to: _CNE		
ENTRY FEES:	Conformation: \$30.00 Official Cl	ass <u>\$10.00</u> Eac	ch Unofficial Conformation Class		
(per dog/per day)	Sweepstakes: \$12.00		nior and Senior Puppy Class		
	Performance: \$15.00 1st Obedie		ch Unofficial Obedience		
(Cl-:1 du	\$15.00 Rally	<u>\$8.00</u> Eac	ch Additional Rally Class		
(per child/per day Children	is Handling: \$6.00				
CATALOGS (One catalog co	overs both days): Pre-paid: \$12.00 (Ri	ngside: <u>\$15.00)</u> Quant	ity Requested:		
CKCSC Reg./PEN #	Registered Name of Dog_				
Classes Entered					
Official	Unofficial				
Conformation		S	Sweepstakes		
Official	Unofficial		•		
	Obedience	F	Rally		
Owner/Family Member Per	rforming Exercise	1	Agility NOT OFFFRED		
Dog Information	norming Exercise		ignity <u>NOT OFFERED</u>		
· ·	Date of Birth	Country of Mating	Country of Birth		
Address_		_breeder			
•		State Z	Zip+4		
			1		
	E-mail_ ess to which you want any correspondence sent		Fax		
	, , , , , , , , , , , , , , , , , , ,		-G		
	hold harmless the CKCSC, USA and the event-givin ustained by any person (including myself) or proper				
	and whether or not caused by the negligence of such		term time event, regularized by now enem tees,		
	personally assume all responsibility and liability for				
	y dogs while in or about the event premises or groun				
	eir members, directors, officers, employees and volun e read and will abide by the Show and Performa				
	ove information is correct to the best of my kno		i up intemoer in good standing with the		
Owner's Signature		=			
	CHII DREN'S	S HANDLING			
Name of Handler	CHIEDREN	Birth Date	Class		
Mail one Summary Sheet an	nd all Entry Form(s) to:	Joan Parker			
Do not send by Certified Mail or any means that requires a signature. If		•	302 Pine Ridge Circle		
proof of mailing is needed, purchase a Certificate of Mailing from the		Winterville, GA, 30683			
Post Office Keen it and a conv of your entries					

Post Office. Keep it and a copy of your entries.