CKCSC-USA

Agility

May 17th & 18th, 2025



Hosted by CNE

Trial Location
Premier Sports Center
3 Coleman Court

Vincentown, NJ 08088

Unlimited Runs for Cavalier King Charles Spaniels Pre-registration Required.

Trial will be one ring held INDOORS
Equipment provided by Premier Sports Center
Show hours: Sat. & Sun 8am to 5pm.
Ring size 85 x 95 on sprint turf

Judge:

Paula Miloglav-Recco (AKC) MA

Show Schedule:

Saturday: Order of Classes

Trial #1 Novice STD all heights Trial #2 Novice STD all heights Trial #1 Open STD all heights Trial #2 Open STD all heights Trial #1 Excellent STD all heights Trial #2 Excellent STD all heights Trial #1 Novice JWW all heights Trial #2 Novice JWW all heights Trial #1 Open JWW all heights Trial #2 Open JWW all heights Trial #1 Excellent JWW all heights

Trial #2 Excellent JWW all heights

Sunday: Order of Classes

Trial #3 Novice JWW all heights
Trial #4 Novice JWW all heights
Trial #3 Open JWW all heights
Trial #4 Open JWW all heights
Trial #4 Excellent JWW all heights
Trial #4 Excellent JWW all heights
Trial #3 Novice STD all heights
Trial #4 Novice STD all heights
Trial #3 Open STD all heights
Trial #4 Open STD all heights
Trial #4 Excellent STD all heights
Trial #4 Excellent STD all heights

Entry Fees

\$18 first class, \$12 additional class same dog per trial

Prizes

First Place	Blue Rosette
Second Place	Red Rosette
Third Place	Yellow Rosette
Fourth Place	White Rosette
Qualifying	Dark Green Ribbon

All Exhibitors are required to assist with course building and all other tasks required on Trial day

Volunteers Needed

Please contact Sabine Gregory
if you are not an exhibitor
and would like to volunteer.
All volunteers may have a run-thru for their dog.

Agility Event Classes Please refer to

http://ckcsc.org/performance-class-definition

This will be a one ring trial, indoors on turf.

HOTELS

Reminder: Check for any dog fees when making reservations.

Red Roof Inn – 603 Fellowship Rd., Mt. Laurel, NJ 08054 (856)234-5589 **LaQuinta**— 5000 Clover Rd., Mt. Laurel, NJ 08054 (856)235-7500

ROUTES TO SHOW

Premier Sports Center, LLC 3 Coleman Court, Southampton, NJ 08088 For GPS: USE THE TOWN PROPER NAME: VINCENTOWN

From Philadelphia: From the Ben Franklin bridge, take RT 30 E/Route 676 S exit on left toward RT 130/38/70/Cherry Hill/Camden Waterfront. Continue onto US-30 E (keep left). Take NJ-38 E ramp on left to NJ-70 E Cherry Hill. Take the NJ-70 E ramp to Cherry Hill. Continue on RT-70 E. Turn left onto Red Lion Rd. Turn left onto Eayrestown Rd. Turn right onto Coleman Ct

From NJ turnpike and North: head south on NJ Turnpike. Take exit 7 to merge onto US-206. Turn right onto Ridge Rd. Turn left onto Red Lion Rd. Turn right onto Eayrestown Rd. Turn right onto Coleman Ct.

From Shore Points and South: take Atlantic City Expressway W.
Take exit 28. Merge onto NJ-54 N /12th St. toward
Hammonton/Trenton. Merge onto NJ-54 N/12th St. Turn right onto
Bellevue Ave. Continue onto US-206 N/Trenton Rd. At traffic circle,
take 3rd exit onto NJ-70 W. Turn right onto County Rt 685.
Continue onto Eayrestown Rd. Turn right onto Coleman Ct

CNE Officers and Directors

President: Anne Knauss Vice President: Gloria Rubino Treasurer: Joyce Cromett Secretary: Carla Close

Regional Representative: Trisha DePhillip

Directors: Judy Perrini, Deb Mitchum, Karen Sage, Barb Curly

Show Committee

Show Chairperson Sabine Gregory 609-220-3929
Performance Chairperson Sabine Gregory
Trial Secretary Kristine Schmidt 631-827-2900
Prize & Ribbon Chairperson Sabine Gregory
Prize & Ribbon Steward Sabine Gregory

CNE Show Rules and Performance Rules Committee

Kristine Schmidt Sabine Gregory Lois Henry

Any Questions regarding this trial should be addressed to Kristine Schmidt

(c)631-827-2900 daisylanecavaliers@yahoo.com

Mail all entries to:

Kristine Schmidt 384 Birch Hollow Drive Shirley, NY 11967

Raffle Collection: We will be collecting items to be raffled off at the show. So if you have any items that you would like to donate, please contact
Sabine Gregory 609-220-3929
sgregory5@verizon.et

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): Closing Date (Postmark	CNE Dates of S Monday May 5 th , 2	Shows: May <u>17th & 18th, 2025</u> 2025
All entries must be account entries for this show with to the CKCSC, USA, to	ll be refused/rejected	NTRY FEE. If the check does not clear A portion of regional show fees are pai g expenses.
Class (circle): Regular Jump Height (circle): STD: NovA NovB Ope	4 8 12 16 1	Enclose copy of jump height card : NovA NovB Open Ex Masters
Select trial and classes	(check appropriate be	ox(s)
Trial #1 STD (\$18)	JWW (\$18)	STD & JWW (\$30)
Trial #1 STD (\$18) Trial #2 STD (\$18) Trial #3 STD (\$18)	JWW (\$18)	STD & JWW (\$30)
Trial #3 STD (\$18)	JWW (\$18)	STD & JWW (\$30)
Trial #4 STD (\$18)	JWW (\$18)	STD & JWW (\$30)
DISCOUNTS:		
Trial #1 STD (\$18) Trial #2 STD (\$18) Trial #3 STD (\$18) Trial #4 STD (\$18) DISCOUNTS: \$20 discount if dog is 6	entered in all four trials	s. \$10 Jr. handler discount.
Total entry fees:	payable to	o CNE, check#
Do not send by Certified N	Aail or any means that re	rch Hollow Drive, Shirley, NY 11967 requires a signature. If proof of mailing is Post Office. Keep it and a copy of your
Reg#	Dog's C	Call Name
Registered Name		
Owner(s)		
	one numberHandler	
OBJ		
I hereby certify that I h that I am a paid up Men inforn	ave read and will abide l wher in good standing wi nation is correct to the bo	by the Show and Performance Event Rules, ith the CKCSC, USA, and that the above est of my knowledge.
Owner's Signatur	e	Date

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	Preferred 4 8 12 16 <i>Enclos</i> n Ex Masters JWW: Nov	se copy of jump height card A NovB Open Ex Masters	
Select trial and classes	(check appropriate box(s)		
Trial #1 STD (\$18)	TX/XX/ (010)	STD & JWW (\$30)	
Trial #2 STD (\$18)	JWW (\$18)	STD & JWW (\$30)	
Trial #3 STD (\$18)	JWW (\$18)	STD & JWW (\$30)	
Trial #3 STD (\$18) Trial #4 STD (\$18)	JWW (\$18) JWW (\$18)	STD & JWW (\$30)	
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Total entry fees:	make checks pa	yable to CNE, check#	
		bllow Drive, Shirley, NY 11967 s a signature. If proof of mailing is office. Keep it and a copy of your	
Reg#	eg# Dog's Call Name		
Registered Name			
		r	
[OBJ]			
I hereby certify that I h that I am a paid up Men inforn	ave read and will abide by the nber in good standing with the nation is correct to the best of	Show and Performance Event Rules, CKCSC, USA, and that the above my knowledge.	
Owner's Signature	e	Date	