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. Check off day(s)/event(s) entered. Show-giving Club(s): Cavaliers Of The Northeast August 17, 2025 Dates of Shows: Trial 1 Trial 2 August 1, 2025 **Closing Date (Postmark):** No Late Entries Accepted? Scent Work (Sunday) Incomplete/incorrect entry is subject to \$25 late entry fee unless entry correction/completion is received prior to postmark closing. Late entries accepted only as stated on this entry form. All entries must be accompanied by FULL ENTRY FEE. If the check does not clear, entries for this show will be refused/rejected. A portion of regional show fees are paid to the CKCSC, USA, to cover show operating expenses. ENTRY FEES: Performane: (per dog/per day) First Entry (Per Trial) \$25.00 Each Additional Entry \$10.00 CATALOGS (One catalog covers all shows): Pre-paid: \$15.00 (Ringside: \$15.00) Quantity Requested: CKCSC Reg./PEN # Registered Name of Dog **Classes Entered** (*Please specify if A or B*) Scent Work Class(es) Dog Information Color Sex Date of Birth Country of Mating Country of Birth Registered Name of Sire Registered Name of Dam Owner(s) Breeder Address City State Zip+4 Phone

E-mail

(If dog is co-owned, give address to which you want any correspondence sent.)

I hereby agree to release and hold harmless the CKCSC, USA and the event-giving club, and their members, directors, officers, employees and volunteers, from any loss, injury or damage which may be sustained by any person (including myself) or property (including my dogs) in connection with this event, regardless of how such loss, injury or damage may be caused, and whether or not caused by the negligence of such parties.

In addition, I hereby agree to personally assume all responsibility and liability for any loss, injury or damage which may be caused directly or indirectly to any person or thing by the act of myself or my dogs while in or about the event premises or grounds or near any entrance thereto; and I hereby agree to indemnify the CKCSC, USA and the event-giving club, and their members, directors, officers, employees and volunteers, from any claim for such loss, injury or damage.

I hereby certify that I have read and will abide by the Show and Performance Event Rules, that I am a paid up Member in good standing with the CKCSC, USA, and that the above information is correct to the best of my knowledge.

Owner's Signature

Date

JUNIOR SHOWMANSHIP			
Name of Handler	Birth Date	Class	
Mail or Email one Summary Sheet and all Entry Form(s) to:➔	Flynn Weeks		
Do not send by Certified Mail or any means that requires a signature. If	2696 Cheyennes Trail		
proof of mailing is needed, purchase a Certificate of Mailing from the	Gerrardstown, WV 25420		
Post Office. Keep it and a copy of your entries.	cneshowsecretary@gmail.com	<u>1</u>	