NCFBC 2010 SPECIALTY ENTRY FORM
1 - DOG / 1 - HANDLER PER FORM
No entries are complete until your payment is confirmed.
Payable To: NCFBC C/O Susan Bunyard, 2500 Oakvale Drive, Shingle Springs, CA 95682 Ph. 530.677.1975

ENTRY TYPE:	**NEW**	**ENTRY NUMBER:**		**≺≺ (For multiple entry payments on 1 check)**	
SUBMITTER NAME:					
SUBMITTER PHONE:					
SUBMITTER EMAIL:					
SUBMITTER ADDRESS:					
SHOW NAME:	**NCFBC 2010 SPECIALTY**				
REG. NAME::					
BREED:					
AKC REG #:					
DOB:					
SEX:					
PLACE OF BIRTH:					
BREEDER:					
SIRE:					
DAM:					
OWNER:					
HANDLER:					
	CLASS NAME and ENTRY FEE $ according to the Premium	**ENTER DATE 5/15 AM**	**ENTER DATE 5/15 PM**	**ENTER DATE Day 3**	**ENTER DATE Day 4**
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER CLASS: FEE					
ENTER TOTAL ENTRY FEES	**$**				

Jr. Handler Agent:		**Agent ID:**			
Jr. Handler Name:		**Jr. DOB:**			
Jr. Handler AKC #:		**Jr. Handler Address:**			
Jr. Handler Relationship:		**Agent / Other:**			

By signing the entry form I (we) certify that the junior handler does not now and will not at any time, act as an agent/handler while continuing to compete in Junior Showmanship. If you do not have a junior handler # call AKC at (919) 816-3776.

Signiture:

Address:

Mail Check to:	**NCFBC C/O Susan Bunyard, 2500 Oakvale Drive,Shingle Springs, CA 95682**				
Name on Check:		**Dog Name**			
Check#:					

This area must be completed for multiple entry forms paid by 1 check (1st entry Only)
Make sure your entries are numbered at the top of the entry and all are submitted with your check.

Check entries to be payed by the above check # :	**#1 Entry Check ☐**	**#2 Entry Check ☐**	**#3 Entry Check ☐**	**#4 Entry Check ☐**	**#5 Entry Check ☐**	**#6 Entry Check ☐**
Entry $ per entry form:	$	$	$	$	$	$
Total Fees check amt:	**$**					
Name on Check:			**Check number from above:**			
Complete Entries Verification	**Dog Name:**		**Handler:**			
Entry #1:						
Entry #2:						
Entry #3:						
Entry #4:						
Entry #5:						
Entry #6:						

Comments:	