



## GENERAL ORDER FORM

If you prefer to send in your reservations by Mail and pay by check, use this General Order Form. Don't forget to attach the required forms, where indicated.

ITEM	QUANTITY and ITEM COST	TOTAL
Welcome Bags Reserve bags for the following people:		Free
Juniors Participation: Please list any Child under 18 participating in any National Event so we can have a Juniors Gift for them:		Free
Rescue Parade Participation – Submit Registration Form		Free
ESSFTA Top Twenty	# ____ Individual Ticket - \$40 each # ____ Reserved Table for 8 - \$440 for the Table # ____ Individual Seat at a reserved Table - \$55  Names of People you are buying Tickets for:   If you have been invited to sit at a reserved table, please tell us who your Hostess is: _____	\$
Awards Banquet	# tickets at \$ 40/person: _____	\$
Puppy/ Veteran Sweepstakes Spectacular	\$25 per entry - Submit Entry Form	\$
Show Catalog Sales	#____ Prepaid at \$20 each #____ Marked and/or mailed at \$30 each Mail to:	\$
IMPACT CRATE Raffle Tickets	# ____ Single Ticket at \$10 each # ____ 3 pack Tickets at \$25 for a 3-pack three	\$

Trophy Donation	\$ _____ General Trophy/Ribbon Fund donation \$ _____ Sponsor a specific Award – check website to see what award is available and fill in amount associated with the award. Citation to be included in the Catalog:	\$
General Donation	<input type="checkbox"/> Welcome Bags amount donated: _____ <input type="checkbox"/> Daily Socials amount donated: _____ <input type="checkbox"/> Puppy/Vet Sweeps amount donated: _____ <input type="checkbox"/> Juniors amount donated: _____ <input type="checkbox"/> General amount donated: _____	\$
R/V Reservations	Submit Reservation Form # nights ____ at \$45 per night Main Lot # nights ____ at \$30 per night Overflow Lot	\$
Grooming Area	Submit Reservation Form # _____ outlets at \$45 each	\$
Show Catalog Advertising	# ____ Full page at \$70 (\$100 commercial) # ____ Half Page at \$40 (\$75 commercial) # ____ 2-page spread at \$120 Submit Ad to April Leonetti	\$
CGC/CGCA/Tricks Test Pre-registration	Submit Pre-Registration Form \$10 per entry	
Vendor Booth	<input type="checkbox"/> 10 x 10 at \$100 <input type="checkbox"/> 10 x 20 at \$150 Submit Reservation Form	\$
Final Totals		\$

Mail checks payable to ESSFTA and mail to Jean Hilbig at 12000 W. 76<sup>th</sup> Avenue Arvada CO 80005. Don't forget to include the required reservation/entry forms

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## GROOMING AREA RESERVATION FORM –

NAME(s): \_\_\_\_\_

PHONE (Cell # is preferred) \_\_\_\_\_ EMAIL: \_\_\_\_\_

Expected Arrival Date: \_\_\_\_\_

Number of Crates: \_\_\_\_\_

Number of Grooming Tables: \_\_\_\_\_ Number of Electrical Outlets: \_\_\_\_\_

Names of Individuals Sharing your space: \_\_\_\_\_

Please reserve me space near: \_\_\_\_\_

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## PUPPY/ VETERAN SWEEPSTAKES SPECTACULAR ENTRY FORM

Registered Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

Breeder: \_\_\_\_\_

Owner: \_\_\_\_\_

Email: \_\_\_\_\_

Qualifying Win:

Award Won: \_\_\_\_\_ Date: \_\_\_\_\_

Specialty or Supported Entry where won: \_\_\_\_\_

Puppy/Veteran Class Entered determined by the age on August 15, 2018

Junior 6-12 months:      Age: \_\_\_\_\_ Dog       Bitch

Senior over 12 months:      Age: \_\_\_\_\_ Dog       Bitch

Veteran:      Age: \_\_\_\_\_ Dog       Bitch

RV RESERVATION FORM –

NAME(s): \_\_\_\_\_

PHONE (Cell # is preferred) \_\_\_\_\_ EMAIL: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date : \_\_\_\_\_

Which RV Lot?  Main Event Center RV Lot)  Overflow RV Lot

RV type:  RV  Trailer  5<sup>th</sup> Wheel

RV or Trailer Length: \_\_\_\_\_ Number of Dogs \_\_\_\_\_

License tag Number and State of RV: \_\_\_\_\_

Rental RV Provider: \_\_\_\_\_ Rental delivery date: \_\_\_\_\_

EXTRA VEHICLE:  Tow Car  Rental Car

License number and State of Second Vehicle: \_\_\_\_\_

Request Handicap space  Yes  No

Park me next to?? \_\_\_\_\_

Space or Row Requested: \_\_\_\_\_

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CGC/TRICKS REGISTRATION FORM

Owner: \_\_\_\_\_

Email: \_\_\_\_\_

Dog Registered Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: \_\_\_\_\_

AKC or ILP#: \_\_\_\_\_

Test Registering For:

CGC  CGCA  TRICKS

## VENDOR BOOTH RESERVATION FORM –

NAME(s): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

TYPE OF PRODUCT YOU SELL: \_\_\_\_\_

10' x 10' BOOTH

10' x 20' BOOTH

Expected Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

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## RESCUE PARADE REGISTRATION FORM

Owner Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone number: \_\_\_\_\_

City and State: \_\_\_\_\_

Dog Name: \_\_\_\_\_

Dog's age: \_\_\_\_\_

Adoption date/rescue organization: \_\_\_\_\_

Foster home (if known): \_\_\_\_\_

Family Name (how you would like it to appear in the program): \_\_\_\_\_

Brief write up of your dog's story: (attach pages if needed)