



# Official Entry Form

**PPDBA**

**American Canine Association Sanctioned Dog Show**

## Conformation Show

April 4th, 2024

- 10:00 am - 10:45am Check-in
- 11:00 am Conformation Show
- Puppy Class following Dog Show

### Location

1555 Weaverland Road, East Earl

- ✓ **One canine per form**
- ✓ **Attach accredited registration certificate**

- Registered Name of Canine: \_\_\_\_\_
- Registration Number: \_\_\_\_\_
- Dog Breed: \_\_\_\_\_ Canine D.O.B.: \_\_\_\_\_ Sex of Canine: \_\_\_\_\_
- Owner's Name: \_\_\_\_\_
- Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_
- Address: \_\_\_\_\_
- City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_
- Handler's Name: \_\_\_\_\_



**Dog Show**



**Puppy Class**

Any photographs generated from this event may be used by ACA for promotional purposes. Full permission is given to the American Canine Association, Inc. to use photos, or electronic form of the same, in a public area. No monies, credits or obligations are due to either party. All applicants hold the ground owners harmless for any accident or injury.

Owner's Signature: \_\_\_\_\_

Entry fee: PPDBA Members - No charge

Entry fee: Non-PPDBA Members \$15.00 1st canine per show,  
additional canines \$10.00 per show.

Puppy Class & Junior Handler free entry

Make check payable to : PPDBA

Email to: [dogshows@acadogs.com](mailto:dogshows@acadogs.com) Fax to: 1-800-422-1864

Questions call: ACA 1-800-651-8332





# DOG EVENT ENTRY FORM

(Please print clearly and legibly. Thank you)

ACA Sanctioned Dog Show

PPDBA

1555 East Weaverland Rd, East Earl, PA

April 4, 2024

## DOG INFORMATION

Breed	
Registered Name	
Registered #	
Color(s)	
Sex	
Whelped	
Group Name	

## DOG SHOW #1

Judge				
Type of Ring	Number of Dogs in Ring	Winning Place	Points	Major
Best of Breed/Sex				<input type="checkbox"/>
Best of Breed				<input type="checkbox"/>
Best of Group				<input type="checkbox"/>
Show				<input type="checkbox"/>
Dog Show Date: ____/____/____			Total Points	

## DOG - OWNER INFORMATION

Full Name	
Address	
City	
State	
Phone Number	
Email Address	

## HANDLER INFORMATION

Full Name	
Address	
City	
State	
Phone Number	
Email Address	
Handler #	