Sandusky Kennel Club, Dayton Kennel Club, Lima Kennel Club, Central Ohio Kennel Club

Supported Entry/Specialty Club Agreement for the Mid-Ohio Fall Cluster

Officer:	Phone:	Cell:	
City: St	ate/ Zip: Email:		by signing below, the
above named persons ar Ohio Fall Cluster AKC Lice	e designated representatives of the na ensed Dog Shows as selected, meeting	amed specialty club which ag g all requirements listed by Ju	rees to participate with the Mid- Ily 1 prior to Fall show:
	trophies/awards [minimum] to be provic		
	vill provide a list of "Preferred Judges" no l		Jub of selected day.
	ht to bring in its own judge at its own exp		
	he full name, address, cell phone number		
	now will reimburse the club \$2 per regula i		<u>y.</u>
	now will reimburse the club \$1 per regula i	· · · · · · · · · · · · · · · · · · ·	
 Specialty Club will pay Mi 	id-Ohio Host Club \$3 per regular entry for	a Concurrent Specialty. (contac	t MB-F for individual contract)
	l provide a 3 streamer rosette for BOB, BC ole(s) at the event for use by the designate		-
Name of Club			
Event Coordinator:		Cell:	
Address:	City		State/ Zip
Email:			
Please check all that apply:			
Sandusky KC-Thursday		Lir	ma KC-Saturday
 [] Designated Specialty* (A [] SWEEPSTAKES (AKC & Parer [] Concurrent Specialty* (A 	ovals needed, unless required by parent club) KC & Parent Club approval needed) nt Club approval needed). [] Puppy [] Veteran KC & Parent Club approval needed) to support entry Sandusky show)	[] Designated Specialty* (AKC 8	& Parent Club approval needed) Club approval needed) [] Puppy [] Veteran & Parent Club approval needed)
Dayton KC-Friday		Central Ohio KC-S	Sunday
[] Supported Entry (no appr [] Designated Specialty* (AF [] SWEEPSTAKES (AKC & Parer [] Concurrent Specialty* (A # of tables- Signatures Required:	oval needed, unless required by parent club) KC & Parent Club approval needed) nt Club approval needed). [] Puppy [] Veteran KC & Parent Club approval needed)	 []Designated Specialty* (AKC & [] SWEEPSTAKES (AKC & Parent CI [] Concurrent Specialty* (AKC & # of tables- 	lub approval needed) [] Puppy [] Veteran
Specialty Club Officer			
Name & Position			
de la			

*Once the premium is printed and distributed, failure to support the entry and provide trophies as herein agreed upon, will result in a cancellation fee of \$250 to offset the cost of trophies & judges hired. RETURN A SIGNED COPY OF THIS AGREEMENT TO: Mid-Ohio Cluster SPECIALTY COORDINATOR KAREN FISCHBACH 1100 Hills Miller Road, Delaware, OH 43015 Phone: 216-952-3382 Email: symmetryoes@hotmail.com