



2024 ABdFC National Specialty Reservation Form

Registration Closing Date: 9/14/24

Contact Info

Please complete this form, return via mail at the address listed on page 2.

Print a copy for additional people.

Reservation Information

Name of Person #1 (First/Last)		Name of Person #2 (First/Last)	
Address		City	State/ZIP Code
E-Mail	Phone #1	Phone #2	

Dinners

Awards Buffet Friday at Holiday Inn -\$45

#of people _____

\$ _____
Buffet at
\$45 per person

Welcome BBQ Tuesday - \$8

#of people _____

\$ _____
Welcome BBQ
\$8 per person

Health Testing

\$ _____
at \$125 per dog

Echocardiogram -\$125* - Dr Marshall on Wednesday - Nonrefundable
Number of dogs _____ *Bouvier only – other breeds \$250

\$ _____
at \$25 per dog

Auscultation - \$25* - Dr Marshall on Wednesday - Nonrefundable
Number of Dogs _____ *Bouvier only – other breeds \$50

No Charge

CHIC Blood Draw – No charge
Number of Dogs _____ on Wednesday

\$ _____
at \$40 per dog

DNA Cheek Swab - \$40 Nonrefundable
Number of Dogs _____ on Wednesday

\$ _____
at \$30 per dog

CAER (new CERF)- \$30* - Dr. Giuliano on Wednesday Nonrefundable
Number of Dogs _____ *Bouvier only – other breeds \$60

Miscellaneous

\$ _____ Reserved Grooming Space (10X10 Space) - \$100
There is a 2 space limit. ***Assigned based on postmark of your envelope.

\$ _____ Pre-Paid Catalog - \$25
at \$25 each At the Specialty Catalogs will cost more and be in limited supply,

\$ _____
at \$10 per chair Reserved Ringside Seating \$10 per chair
Note: This does not include seating at Top 20.

Completed Form

Please make checks payable to: **ABdFC**

Mail to:

Nancy Scott
5275 S Crocker St
Littleton, CO 80120

Questions?

Email Nancy at cheybouv@aol.com

\$ _____

**TOTAL AMOUNT
DUE**

Postmarked Date	Check Number	Amount	Sent to Treasurer
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