2021 ABGA and JABGA National Show Entry Form

Completed form and payment must be received in the ABGA Office by 5 pm CST on May 24, 2021.

Owner Name:							ABGA Member #: (One member number per form)						
Email:							Phone:						
	N	ATIONAL	SHOW EN	ITRIES - C	ircle entr	v fee fo	r each show _l	oer an	imal.				
#	# ABGA Registration #		Left	Right	-	JABGA	JABGA JABGA			JABGA		Total Entry	
			mm) Tattoo		Show	Show	Bred & Owned	Market		Comm. Doe		Fee	
1					\$40	\$30	\$20	\$40		\$40			
2					\$40	\$30	\$20	\$40		\$40			
3					\$40	\$30	\$20	\$40		\$40			
4					\$40	\$30	\$20	\$40		\$40			
5					\$40	\$30	\$20	\$40		\$40			
6					\$40	\$30	\$20	\$40		\$40			
7					\$40	\$30	\$20	\$40		\$40			
8					\$40	\$30	\$20	\$40		\$40			
9					\$40	\$30	\$20	\$40		\$40			
10					\$40	\$30	\$20	\$40		\$40			
		TOTAL	ENTRY N	UMBERS									
See 2021 National Show Enter To			otal Numl	al Number Entries Per Show			EXTRAS		QTY.	FEE	S	TOTAL	
Rules for additional details. Entry		ABGA	JABGA	JABG	A	Total Pairs		•	\$10)			
				B&O		Total Groups			\$10				
# of Pens Requested: Pairs				 	N/A		Banquet Total Entry Foos (from		/from c	\$15			
Please pen near (if possible) Groups					N/A		Total Entry Fees (from Total Amount Due to A			•			
Payr	nent:VisaM		AmEx	Disc	3 Digit Code	 :()	Check (#_		_)	MO	Casl	<u> </u> 	
Payn	nent:VisaM	C	AmEx	Disc	3 Digit Code	·()	Check (#_		_)	MO	Casl	<u> </u> n	
Payr	nent: W	C					Check (#_				Casl	h _ Card Number	
Payr	nent: Wisa M	C	AmEx Exp.Da		3 Digit Code		Check (#_			MO	Casi		
	nent:VisaM		Exp.Da				Check (#_				_Casl		
Applica respons by reas cause vexpens to persi		different from that the Americonnection will liability whatse A's negligence tital or punitive) of any other pe	Exp.Da m above ican Boer Goa th, arising out bever with resp). Applicant he which ABGA articipant, of a	at Association, of, or incident pect to any injument any at any timent any other parties.	its officers, di to the Nationary to person of hold harmless the suffer or susse, or to the pr	rectors, age al Show. App or damage to s and uncon stain or beco operty of Al	ints, employees and plicant further and h to or loss of proper diditionally indemnify ome liable for by res BGA, in any matter	- d volunte ereby ex y (includ ABGA a ason of a	Print Nar ers (he rei expressly wiling conse gainst and	me on Card after collective aives all right quential dams for all claims nts, damages	ely "AB s to clai ages) re , liabiliti , injurie	_ Card Number GA") shall not be im against ABGA esulting from any es, losses, costs, as or losses either	
Applica respons by reas cause v expens to pers hereun The un- by all o	older Address and Zip Code if ant hereby acknowledges and agrees sible for any loss, injury or damage in son of, and releases ABGA from any whatsoever (expressly including ABG. ess, and damages (actual, consequer ons, property or both, of participant,	different from that the Ameri connection wi liability whatso A's negligence tital or punitive) of any other pa egligent act or doges the receip that the Exec	Exp.Da m above ican Boer Goa th, arising out sever with resp). Applicant he of which ABGA omission of A ot of a copy of outive Committed	at Association, of, or incident pect to any injureby agrees to may at any tim ny other partie BGA, its office the National Stree of ABGA re	its officers, dinto the Nationary to person or hold harmless are suffer or sures, or to the press, agents, emow Rules and serves the fire	rectors, age al Show. App or damage is and uncon stain or beco operty of Al ployees, or d certifies that lal and abso	ints, employees and plicant further and ho or loss of proper iditionally indemnify ome liable for by rea BGA, in any matter volunteers. at he/she has read a blute right (a) to inte	d volunte lereby ex ty (includ ABGA a asson of a arising f	Print Nar ers (he reachers) with the rest of the reachers and the rest	after collective aives all right quential dama for all claims ints, damages ected with or	ely "AB s to clai ages) re , liabiliti , injurie incider	_ Card Number GA") shall not be im against ABGA esulting from any es, losses, costs, es or losses either at to the activities er agrees to abide	
Applica respons by reast cause vexpens to persibereum. The uniby all o question	older Address and Zip Code if int hereby acknowledges and agrees sible for any loss, injury or damage in son of, and releases ABGA from any whatsoever (expressly including ABG, es, and damages (actual, consequer ons, property or both, of participant, der, including but not limited to any n dersigned applicant further acknowled f the Show Rules and acknowledges	different from that the Ameri connection wi liability whatso A's negligence tital or punitive) of any other pa egligent act or doges the receip that the Exec	Exp.Da m above ican Boer Goa th, arising out sever with resp). Applicant he of which ABGA omission of A ot of a copy of outive Committed	at Association, of, or incident pect to any injureby agrees to may at any tim ny other partie BGA, its office the National Stree of ABGA re	its officers, die to the National ry to person of hold harmless he suffer or surs, or to the press, agents, emnow Rules and seerves the fire cause of actions.	rectors, age al Show. App or damage to and uncon stopperty of Al ployees, or al certifies that all and abso	ints, employees and plicant further and ho or loss of proper iditionally indemnify ome liable for by rea BGA, in any matter volunteers. at he/she has read a blute right (a) to inte	d volunte lereby ex ly (includ ABGA a ason of a arising f and unde	Print Nar ers (he recorders) with the recorders of the recorders of the recorder of the record	after collective aives all right quential dama for all claims nts, damages ected with or lem. Applican iles; and (b) t	ely "AB s to clai ages) re liabiliti incider t furthe o deter	_ Card Number GA") shall not be im against ABGA esulting from any es, losses, costs, es or losses either at to the activities er agrees to abide	