

## PAYMENT SUMMARY ORDER FORM

Payment by check for orders and reservations:

Mail order form(s), Summary Form and check payable to **2025 NCA National Specialty to:**

**John Affel – NCA Specialty, , 5 Timber Lane, Saratoga Springs NY 12866**

PLEASE NOTE: To accommodate the various deadlines, please make additional copies of this form.

\*\*\*\*\*PLEASE COMPLETE LEGIBLY\*\*\*\*\*

NAME \_\_\_\_\_

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

CITY, STATE, ZIP, COUNTRY: \_\_\_\_\_

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

### FEBRUARY 15 DEADLINE:

Catalog Advertising (page 2 ) ..... \$ \_\_\_\_\_

### APRIL 1st DEADLINE:

Banquet (page 3 ) ..... \$ \_\_\_\_\_

Cardiology Clinic (page 23) ..... \$ \_\_\_\_\_

CGC Entry (page 4) ..... \$ \_\_\_\_\_

Friday Night Pre-Auction Dinner (page 28)..... \$ \_\_\_\_\_

Golf Cart Orders (page 5 ) ..... \$ \_\_\_\_\_

H&L Seminar: Dr. Deb Gross Torraca (page 6) ..... \$ \_\_\_\_\_

Honors Parade (page 7 ) ..... \$ \_\_\_\_\_

International Concierge Packages (page 8) ..... \$ \_\_\_\_\_

Living Legends (page 9-10 – **2 page form!**)..... \$ \_\_\_\_\_

Lovett Working Dog Challenge (page 11) ..... \$ \_\_\_\_\_

Ophthalmology Clinic (page 24)..... \$ \_\_\_\_\_

Post-Show Catalog (page 12) ..... \$ \_\_\_\_\_

Rescue Parade (page 13) ..... \$ \_\_\_\_\_

Registration (page 14) ..... \$ \_\_\_\_\_

Reserved Grooming Space (page 15) ..... \$ \_\_\_\_\_

Reserved Parking (page 16)..... \$ \_\_\_\_\_

Reserved Ringside Seating (page 17) ..... \$ \_\_\_\_\_

RV Parking (page 18)..... \$ \_\_\_\_\_

Top 20/10 Celebration/Merchandise Orders/Program Ads/Event Sponsors (page 19) ..... \$ \_\_\_\_\_

Trick Dog Entry (page 20) ..... \$ \_\_\_\_\_

### APRIL 15<sup>th</sup> DEADLINE:

Specialty Carting (page 21) ..... \$ \_\_\_\_\_

Water (page 22) ..... \$ \_\_\_\_\_

### FORMS – REQUEST INFO/CONTACT COMMITTEE CHAIR DIRECTLY

Meeting Room Request (page 25) ..... Form Only

Vendor Request (page 26) ..... Form Only

Volunteers (page 27) ..... Form Only

**TOTAL (make checks payable to “2025 NCA National Specialty”)**..... \$ \_\_\_\_\_

*Please Note: Postdated checks cannot be accepted. All returned checks (NSF) will be charged a \$40 Service Fee.*

*NSF Checks do NOT constitute a valid registration.*

Do you prefer purchasing by credit card? All orders and reservations are available at [www.ncanationalspecialty.org](http://www.ncanationalspecialty.org).

## CATALOG ADVERTISING

**Deadline: February 15, 2025    PAYMENT METHODS:**

|   |  |
|---|--|
| <p><b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a></p> | <p><b>Checks</b> – Payable to <b>2025 NCA National Specialty</b></p> <p>Mail check along with this form and a Payment Summary Order Form to:</p> <p style="text-align: center;"><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b></p> <p>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</p> |
|---|--|

**CONTACT: Terry Linehan, [terrynewf2@gmail.com](mailto:terrynewf2@gmail.com)**

**Send ad copy and images to Terry Linehan. Electronic copy is preferred over mailing hard copy.**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (numbers) \_\_\_\_\_ Email \_\_\_\_\_

***Please copy this form for each ad.***

- Use black & white or colored glossy photos or email digital photos in jpg format with 300 DPI resolution. Sample layout can be submitted in Word or PDF formats.
- Clearly print or type all hard copy, please! Electronic copy is preferred.
- Label the back of each photo with your name and address (don't write on the photo itself!) and enclose a SASE if you want the photo returned by mail.
- Ads & photos will be available for pickup during the Specialty at the Catalog Sales table.

Full page (7<sup>1</sup>/<sub>2</sub>" x 4<sup>1</sup>/<sub>2</sub>") b/w \$80 \_\_\_\_\_

(single photo)

Full page (7 1/2" x 4 1/2") color \$125 \_\_\_\_\_

(single photo)

Additional page (b/w) \$50 \_\_\_\_\_

(no photo)

Additional page (color) \$100 \_\_\_\_\_

(no photo)

Half Page (3<sup>3</sup>/<sub>4</sub>" x 4<sup>1</sup>/<sub>2</sub>") \$30 \_\_\_\_\_

(no photo)

TOTAL: \_\_\_\_\_

***Transfer the above total amount to Summary Sheet with payment.***

## BANQUET RESERVATION FORM

Deadline: April 1, 2025

### PAYMENT METHODS:

|   |   |
|---|---|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br><i>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</i> |
|---|---|

**Contact: Sue Marino** - chnewf14@gmail.com

Tickets are \$75 each. Only the **first 250** tickets purchased will receive a commemorative napkin ring with the letter “F” to finish the set, which has been graciously donated by Cissy Sullivan. Tickets must be purchased in advance, and you must be present to receive your napkin ring. If you are ordering more than one ticket, you must indicate the name(s) for whom you are purchasing banquet tickets.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

If purchasing more than one ticket, please indicate the names of other attendees:

# \_\_\_\_\_ Banquet Tickets @ \$75.00 = \$ \_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

## CANINE GOOD CITIZEN TEST REGISTRATION

**DEADLINE: April 1, 2025**

### PAYMENT METHODS:

|   |   |
|---|---|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|---|---|

**CONTACT: Laurel Rabschutz – newfdance@hotmail.com**

CGC testing will be held on Friday, 2, 2025

The entry fee is \$25 per dog. • There will be NO REFUNDS.

Pre-registration is required.

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Number of dogs to test (CGC) \_\_\_\_\_ @ \$25 = \$ \_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

## GOLF CART RESERVATION FORM

**DEADLINE: April 1, 2025**

### PAYMENT METHODS:

|  |  |
|--|--|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|--|

**Contact:** Keith Mallinson - [seadogs42@comcast.net](mailto:seadogs42@comcast.net)

Carts are 4-passenger that convert to a utility cart - Fee is \$375 for the week.

# Carts \_\_\_\_\_ @ \$375 per cart = \$\_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$\_\_\_\_\_**

***Golf Carts will be available for pickup on Sunday afternoon, April 27, 2025 and must be returned to the designated area at the end of judging on Saturday, May 3, 2025.***

Name of person submitting reservation \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

**HEALTH & LONGEVITY SEMINAR with**  
**Dr. Deb Gross Torraca**  
**DEADLINE: April 1, 2025**

**PAYMENT METHODS:**

|   |  |
|---|--|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|---|--|

**Contact:** Shauna Bryant, H&L Chair - [sbpics23@gmail.com](mailto:sbpics23@gmail.com)

Yes, I will be attending the Education Seminar at the 2025 National Specialty

#\_\_\_\_\_ of Seminar Reservations @ \$10 each.

**Total (transfer to Payment Summary Sheet): \$\_\_\_\_\_**

Name of person submitting reservation\_\_\_\_\_

NCA Member - Yes    No    (circle one)

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Phone number(s)\_\_\_\_\_ Email\_\_\_\_\_

## HONORS PARADE ENTRY FORM

Deadline: April 1, 2025

### PAYMENT METHODS:

|   |   |
|---|---|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br><i>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</i> |
|---|---|

**Contact:** Donna Thibault • [donnatbo@live.com](mailto:donnatbo@live.com)

The Honors Parade is the afternoon of Friday, May 2, 2025 at a location TBD.

The entry fee is \$35 per dog. • There will be NO REFUNDS.

Complete a separate form for each dog entered.

Be careful to use correct spelling. All AKC, CKC, and NCA titles may be listed.

Full registered name of dog \_\_\_\_\_

AKC, ILP, or other country registration number (if not AKC, indicate country: \_\_\_\_\_

Dog's Titles (AKC, NCA, CKC) \_\_\_\_\_

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Country of birth \_\_\_\_\_

Breeder \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Owner(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Do you plan to walk in the parade with your dog? Yes \_\_\_\_\_ No \_\_\_\_\_

If you cannot attend, provide the name of the person who can pick up your medallion for you:

\_\_\_\_\_

\_\_\_\_\_ Number of entries @ \$35 = \_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

## INTERNATIONAL CONCIERGE PACKAGE

DEADLINE: April 1, 2025

### PAYMENT METHODS:

|  |  |
|--|--|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|--|

**Contact:** Shauna Bryant - sbpics23@gmail.com

#\_\_\_\_\_ Basic International package \$225 ea. \$ \_\_\_\_\_  
or  
#\_\_\_\_\_ Basic with grooming space add-on \$325 ea. \$ \_\_\_\_\_  
or  
#\_\_\_\_\_ Basic with golf cart \* add-on \$600 ea \$ \_\_\_\_\_  
or  
#\_\_\_\_\_ Basic with grooming/dog plus golf cart\* add-ons \$700 \$ \_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

\*Golf Carts will be available for pickup on Sunday afternoon, April 27, 2025 and must be returned to the designated area at the end of judging on Saturday, May 3, 2025.

Name of person submitting reservation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_



## **LIVING LEGEND AWARD – (2 page form!)**

**Final Deadline Online Orders: April 1, 2025**

**Final Deadline mailing orders: March 20, 2025 (Need extra time for mailing so book can be completed and sent to the printer.)**

### **PAYMENT METHODS:**

|   |  |
|---|--|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|---|--|

**Contact:** Kathi Weaver-Klein. If mailing your form you must email a clear, high-resolution headshot to: Kathi Weaver-Klein at [kathi.newfgirl20@gmail.com](mailto:kathi.newfgirl20@gmail.com)

### **PLEASE DO NOT CROP PHOTOS**

**Living Legends: Newfoundlands owned or bred by NCA members and reaching the age of 10 years or older by April 1st are eligible for the Living Legend Award.**

Past recipients are encouraged to register, as this is a testament to the increased longevity of our breed. In 75 words or less, tell us a favorite story about your dog. (Kathi will edit as needed to make text fit the book.)

#### **First dog:**

Dog's Registered name:  
Call Name:  
Dam:  
Breeders:  
Owner:

Date of Birth:

#### **Second Dog:**

Dog's Registered name:  
Call Name  
Dam:  
Breeders:  
Owner:

Date of Birth:

#### **Third Dog:**

Dog's Registered name:  
Call Name  
Dam:  
Breeders:  
Owner:

Date of Birth:

**Fourth Dog:**

Dog's Registered name:

Call Name

Date of Birth:

Dam:

Breeder(s):

Owner:

**Fifth Dog:**

Dog's Registered name:

Call Name

Date of Birth:

Dam:

Breeder(s):

Owner:

**IF BEING MAILED:** Mailing Address (Street, city, state & zip code:

Email:

Phone number:

**Name of person picking up at National:**

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Include a story for each dog above in 75 words or less about your Living Legend. (Will edit if needed to fit in the book.)

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Package (Poster, Medallion, book) \$35.00      **# of packages**      \$\_\_\_\_\_

Shipping and Mailing fee \$17.00 (USA), \$20 for outside the USA

(If registering multiple dogs add \$5 per dog.)      \$\_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$\_\_\_\_\_**

## LOVETT CHALLENGE

**Deadline: Return this form by April 1, 2025 to:**

Jenny Zablotny • [newfdock@gmail.com](mailto:newfdock@gmail.com) • 517.552.2914

Mail to: 6410 E Allen Rd, Fenton, MI 48430

If you plan to enter draft, obedience, and rally, please complete the form below and mail it by **April 1, 2025**.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (at the show) \_\_\_\_\_ Email \_\_\_\_\_

Dog's Registered Name \_\_\_\_\_

Class & Day Entered:

Draft \_\_\_\_\_ Rally \_\_\_\_\_ Obedience \_\_\_\_\_

## POST SHOW CATALOGS

**Deadline: April 1, 2025**

### **PAYMENT METHODS:**

|   |  |
|---|--|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br><br>Mail check along with this form and a Payment Summary Order Form to:<br><br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b><br><br><small>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</small> |
|---|--|

**CONTACT: Terry Linehan, [terrynewf2@gmail.com](mailto:terrynewf2@gmail.com)**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_ # of Post Show Catalogs order @ \$48 (includes postage) = \$ \_\_\_\_\_

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

**\*Note: International postage rates will apply for orders outside the USA.**

## RESCUE PARADE ENTRY FORM

**Deadline: April 1, 2025**

**Return to:** Shyann Torstenson, 160 Route 6, Columbia CT 06237

**Email Photo to:** shyannverespie@gmail.com

Entries will be accepted by mail or by electronic on-line form at <https://store.ncanationalspecialty.org/shop>

***THERE IS NO ENTRY FEE • All Rescues participating in the ceremony will receive a complimentary commemorative medallion.***

Name of dog \_\_\_\_\_

Sex of Dog \_\_\_\_\_ Dog's Date of Birth \_\_\_\_\_

Name of Owner \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

The parade will be the afternoon of Friday, May 2, 2025

In 75 words or less, describe how your dog came to be a member of the family and include your dog's favorite activity. (Over 75 words will be edited.) PLEASE PRINT LEGIBLY OR TYPE.

**REGISTRATION FORM**  
**Deadline for Registrations: April 1, 2025**

**REGISTRATION OPENS: January 2, 2025**

**PAYMENT METHODS:**

|  |  |
|--|--|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/show">https://store.ncanationalspecialty.org/show</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|--|

**Contact: Mary Bylone - [mbylone@gmail.com](mailto:mbylone@gmail.com)**

Reminder: Registrations are per individual (e.g., a husband and wife require two registrations). The registration fee is \$45 per adult. Junior (ages 8 to 18) registration fees are \$25 for the first junior and \$20 for each additional junior in the family.

**ADULT REGISTRATION**

Name: Please print name(s) to appear on nametags, kennel name, and state and/or country of residence. **Also place an \* for anyone attending the National for the first time**

- |          |                   |
|----------|-------------------|
| 1) _____ | NCA Member? Y / N |
| 2) _____ | NCA Member? Y / N |
| 3) _____ | NCA Member? Y / N |

**JUNIOR REGISTRATION (AGES 8 TO 18)**

Name: Please print name(s) to appear on nametags and state and/or country of residence. (Continue on reverse if needed)

- |          |                   |
|----------|-------------------|
| 4) _____ | NCA Member? Y / N |
| 5) _____ | NCA Member? Y / N |
| 6) _____ | NCA Member? Y / N |

|                                 |        |            |
|---------------------------------|--------|------------|
| Adult Registrations             | @ \$45 | = \$ _____ |
| Junior Registration             | @ \$25 | = \$ _____ |
| Additional Junior Registrations | @ \$20 | = \$ _____ |

**Total (transfer to Payment Summary Sheet): \$ \_\_\_\_\_**

Name of Person Making This (These) Purchase(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Best phone # for contact: \_\_\_\_\_ Email \_\_\_\_\_



## RESERVED GROOMING RESERVATION

### RESERVATIONS OPEN:

**Mail or Delivery Services** – January 2, 2025 earliest postmark – **NCA/NCNE MEMBER EARLY ACCESS**  
January 15, 2025 earliest postmark **NON-NCA/NCNE MEMBER**

**Online Orders** – January 2, 2025 **MEMBER EARLY ACCESS**  
January 15, 2025 earliest postmark **NON-NCA/NCNE MEMBER**

### PAYMENT METHODS:

|  |  |
|--|--|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/show">https://store.ncanationalspecialty.org/show</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br><br>Mail check along with this form and a Payment Summary Order Form to:<br><br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|--|

**Contact:** Dejah Petsch - [dejah\\_petsch@yahoo.com](mailto:dejah_petsch@yahoo.com)

**Reservation and Cancellation Deadline is April 1, 2025 or when available spaces are filled.**

Confirmations will be sent by email unless another method is requested.

Name of person submitting reservation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Please circle days Reserved Grooming Space is needed: M T W Th F S

\_\_\_\_\_ Number of OUTDOOR reserved grooming spaces requested @ \$100 per week each = \$ \_\_\_\_\_  
(5' x 10' space with electrical access; room for 1 table & no more than 2 crates.)

**Total (Transfer this amount to Summary Sheet) \$ \_\_\_\_\_**

Please place me next to \_\_\_\_\_.

***All reservation forms for groups must accompany this request or noted on electronic forms. No guarantee for forms received independently.***



## RESERVED PARKING RESERVATION FORM

**DEADLINE: April 1, 2025 or when available spaces fill**

No refunds will be issued after April 15, 2025

### RESERVATIONS OPEN:

**Mail or Delivery Services** – January 2, 2025 earliest postmark – **NCA/NCNE MEMBER EARLY ACCESS**

January 15, 2025 earliest postmark **NON-NCA/NCNE MEMBER**

**Online Orders** – January 2, 2025 **MEMBER EARLY ACCESS**

January 15, 2025 earliest postmark **NON-NCA/NCNE MEMBER**

### PAYMENT METHODS:

|  |   |
|--|---|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/show">https://store.ncanationalspecialty.org/show</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|---|

**Contact:** Sheila Mallinson - kodiakacres@yahoo.com

Confirmations will be sent by email unless another method is requested.

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Emergency Contact Phone** number for vehicle at show (REQUIRED) \_\_\_\_\_

Email \_\_\_\_\_

Arrival day/date (April 27<sup>th</sup> is earliest arrival) \_\_\_\_\_ Departure day/date \_\_\_\_\_

Type of vehicle \_\_\_\_\_ Length of vehicle \_\_\_\_\_

\_\_\_\_\_ # of single spaces requested (1 vehicle only) @ \$35/week = \$ \_\_\_\_\_

\_\_\_\_\_ # of double spaces \* requested @ \$70/week = \$ \_\_\_\_\_ **\*Circle Configuration Requested**

Side by side 

|  |  |
|--|--|
|  |  |
|--|--|

Front to back 

|  |  |
|--|--|
|  |  |
|--|--|

\_\_\_\_\_ # of quad-spaces requested @ 140/week = \$ \_\_\_\_\_

|  |  |
|--|--|
|  |  |
|  |  |

Prefer to be closer to conformation area or obedience/rally/draft area. (please circle one)

**Total (Transfer this amount to Summary Sheet) \$** \_\_\_\_\_

No Electrical Power Available. No RVs and No Overnight Camping permitted Reserved area.

**Buddy Parking:** If you would like to be parked next to a friend or group of exhibitors, reservation forms **MUST** be received together in the same envelope or noted on the on-line form.

**Parking Passes will be issued and must be on display for in/out access.**

## RESERVED RINGSIDE SEATING FORM

Deadline: April 1, 2025

### PAYMENT METHODS:

|  |   |
|--|---|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br><small>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</small> |
|--|---|

**Contact:** Donna Thibault • [donnatbo@live.com](mailto:donnatbo@live.com)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

### NUMBER OF RESERVED SEATS REQUESTED

# Reserved Ringside Seats \_\_\_\_\_ @ \$200 = \$ \_\_\_\_\_

**Total (Transfer this amount to Summary Sheet) \$ \_\_\_\_\_**

Name(s) for each National Specialty Chair:

\_\_\_\_\_

\_\_\_\_\_

## RV PARKING RESERVATION FORM

**DEADLINE: April 1, 2025 or when available spaces fill**

No refunds will be issued after **April 1, 2025**

**RESERVATIONS OPEN: January 2, 2025**

### PAYMENT METHODS:

**Credit Cards** – use online form found at <https://store.ncanationalspecialty.org/shop>

**Checks** – Payable to **2025 NCA National Specialty**

Mail check along with this form and a Payment Summary Order Form to:

**John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866**

Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation.

**Contact: Lynne Anderson-Powell - ThreePonds\_Newfs@msn.com**

Name: \_\_\_\_\_ Best # to contact you before and at the site: \_\_\_\_\_

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

RV Width & Length (including slides & tow vehicle) \_\_\_\_\_ ft X \_\_\_\_\_ ft Tow Vehicle: Yes \_\_\_\_\_ No \_\_\_\_\_

Are you staying in the host hotel? Yes \_\_\_\_\_ No \_\_\_\_\_ “Buddy” Parking Desired: \_\_\_\_\_

Day of Arrival: \_\_\_\_\_ Day of Departure: \_\_\_\_\_ # of Nights: \_\_\_\_\_

**TOTAL : (\$90/night times # of nights) = \$ \_\_\_\_\_ (Transfer this amount to Summary Form)**

We have made arrangements with the Crowne Plaza for RV parking on the hotel grounds. There are a limited number of spaces available by **PREPAID RESERVATION ONLY**. There are **NO ELECTRICAL OR WATER HOOK-UPS**. There is access to a water and dumping station within 6 miles of the hotel. All parking spaces will be pre-assigned. Requests for parking can be made by completing and mailing the RV Parking Application below. The fee is \$90 per day, This fee is in effect from Monday April 28th to Sunday May 4<sup>th</sup> and the fee charged by the hotel, including tax. Information will be sent to persons making reservations.

**Due to the size of the parking lots and other events that may be taking place at the hotel during the week, no RVs can be parked at any time without a reservation. This includes those that belong to people who are staying in the hotel. The hotel may waive your RV parking fee but we still need to provide you with a site in our RV space and need you to send in a reservation form.**

### —RV PARKING RULES —

Submission of an application for RV parking constitutes an agreement by the submitter to abide by the following basic RV parking rules:

- **Generators** may NOT be operated between the hours of **9 pm and 7 am**.
- **All RVs must be self-contained, and Holding Tanks** must be kept closed. No dumping of gray water or sanitary tanks permitted anywhere on the hotel grounds. Slow dripping of gray water is not allowed. **Any violation of this will result in you being immediately made to leave.**
- Pump service will be available at additional cost (info will be sent with registration packet). There is also a dump center which is approximately 6 miles away. There you will be able to dump your waste water and refill your potable water for a fee.
- **Fire Lanes and No Parking areas** will be maintained.
- No dogs shall be left unattended in outside your RV.
- Everyone is expected to keep his or her RV area clean. Garbage and “poop” must be disposed of properly. Washing of dogs in the RV area **IS NOT** allowed. Please collect loose dog hair resulting from grooming. After all, no one wants your dog hair in his or her parking space.
- RVs may be parked at the site beginning at Noon on Monday, April 28th. RV parking on site will not be allowed prior to this time except by special request. RVs must be off the site by 11 am on Sunday, May 4th. *Parking at the designated RV area is at the owner’s risk. The show-giving club, its members, executive board, officers, agents, superintendents, and the Crowne Plaza will not be liable for any damages, theft, loss or injury which may be sustained while on the show grounds.*

## TOP 20/10 Reservations, Sponsorships & Ads

Deadline: April 1, 2025



Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Email \_\_\_\_\_

### PAYMENT METHODS:

|  |   |
|--|---|
| <p><b>Credit Cards</b> – use online form found at _<br/> <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a></p> | <p><b>Checks</b> – Payable to <b>2025 NCA National Specialty</b></p> <p>Mail check along with this form and a Payment Summary Order Form to:</p> <p><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b></p> <p style="color: blue; font-size: small;">Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</p> |
|--|---|

| Item  | XS | S | M | L | XL | 2X<br>Add<br>\$2 | 3X<br>Add<br>\$4 | Color | Total<br>Qty | Price Each | Total<br>\$ |
|---|----|---|---|---|----|------------------|------------------|-------|--------------|------------|-------------|
| Admission -   |    |   |   |   |    |                  |                  |       |              | \$40.00    |             |
| Sponsor -1964 Beatles – I<br>Want TO Hold Your Hand |    |   |   |   |    |                  |                  |       |              | \$500.00   |             |
| Sponsor – 1965 Petula Clark –<br>Downtown           |    |   |   |   |    |                  |                  |       |              | \$250.00   |             |
| Sponsor – 1966 Rolling<br>Stones-Paint it Black     |    |   |   |   |    |                  |                  |       |              | \$100.00   |             |
| Regional Club Rosette<br>Sponsors                   |    |   |   |   |    |                  |                  |       |              | \$500.00   |             |
| Catalog Ad – Booster                                |    |   |   |   |    |                  |                  |       |              | \$25.00    |             |
| Catalog Ad – ¼ Page                                 |    |   |   |   |    |                  |                  |       |              | \$50.00    |             |
| Catalog Ad – ½ page                                 |    |   |   |   |    |                  |                  |       |              | \$75.00    |             |
| Catalog Ad – Full page                              |    |   |   |   |    |                  |                  |       |              | \$125.00   |             |
| <b>TOTAL</b>  |    |   |   |   |    |                  |                  |       |              |            | \$          |

## TRICK DOG TEST PRE-REGISTRATION

DEADLINE: April 1, 2025

### PAYMENT METHODS:

|  |  |
|--|--|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 38 Evans Dr., Cranbury, NJ 08512-3125</u></b><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|--|

**CONTACT: Laurel Rabschutz – newfdance@hotmail.com**

Trick Dog testing will be held on Friday, May 2, 2025.

The entry fee is \$25 per dog. • There will be NO REFUNDS.

Pre-registration is required.

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Number of dogs to test \_\_\_\_\_ @ \$25 = \$ \_\_\_\_\_

**Total (Transfer this amount to Summary Sheet) \$ \_\_\_\_\_**

**Please circle which level you will be testing at:**

Novice Trick Dog (TKN)

Intermediate Trick Dog (TKI),

Advanced Trick Dog (TKA)

Trick Dog Performer (TKP)

Trick Dog Elite Performer (TKE)

## SPECIALTY CARTING & WAGON EXERCISES

**DEADLINE: April 15, 2025**

No refunds will be issued after **April 15, 2025**

**RESERVATIONS OPEN: January 2, 2025**

### PAYMENT METHODS:

|  |   |
|--|---|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|---|

**Contact: Sue Mendleson - [nff@fairpoint.net](mailto:nff@fairpoint.net)**

or

**Pauline Baldwin**

Dogs that pass Single or Team On-lead Division Exercises are eligible to post enter the Off- lead Division Exercises on site for an additional \$25. Please print legibly. Information on this form will be used to generate a certificate of qualification should the dog and handler pass. For team entries complete a form for each dog.

**Specialty Carting (\$25, select one class) Class: Single On-Lead \_\_\_\_ Single Off-Lead \_\_\_\_ Team On-Lead \_\_\_\_ Team Off-Lead \_\_\_\_**

Full Name of Dog: \_\_\_\_\_ Sex \_\_\_\_\_

Call Name: \_\_\_\_\_ AKC# \_\_\_\_\_ DOB \_\_\_\_\_

Handler's Name: \_\_\_\_\_

Registered Owner(s): \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Total (Transfer this amount to Summary Sheet) \$ \_\_\_\_\_**

**Entry Form Must Be Signed To Be A Valid Entry**

**I understand that I enter my dog in this NCA Working Event at my own risk.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner/Agent duly authorized to make this entry)

Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

## WATER ORDER FORM

**DEADLINE: April 15, 2025**

No refunds will be issued after **April 15, 2025**

**RESERVATIONS OPEN: January 15, 2025**

### PAYMENT METHODS:

|  |   |
|--|---|
| <b>Credit Cards</b> – use online form found at <a href="https://store.ncanationalspecialty.org/show">https://store.ncanationalspecialty.org/show</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY 12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|--|---|

**Contact:** Lynne Anderson-Powell - ThreePonds\_Newfs@msn.com

Purified bottled water is available by pre-order only by the case (6 – 1 gallon bottles/case). No water will be available for purchase at the show site.

Orders will be available for pick up on Monday, April 28<sup>th</sup>. We kindly ask that orders be picked up no later than Wednesday, April 30<sup>th</sup>.

**DEADLINE: April 15<sup>th</sup> NO REFUNDS**

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

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone Number (while at the National) \_\_\_\_\_

Date of Arrival: \_\_\_\_\_

Do you wish to pick up your water or have it delivered? Pick up by appointment only!!!

Pick up \_\_\_\_\_ Phone # to Call: \_\_\_\_\_

Deliver to: Handler Parking \_\_\_\_\_ Reserved Grooming \_\_\_\_\_

Name of the person the **reserved space** is listed under \_\_\_\_\_

\_\_\_\_\_ # of cases: (1 case = 6 one gallon jugs of purified water) @ \$10.00 per case = \$ \_\_\_\_\_

**Transfer total to Summary Order Form \$ \_\_\_\_\_**

## CARDIOLOGY CLINIC INFORMATION FORM

*Deadline: April 11, 2025*

### PAYMENT METHODS:

|   |  |
|---|--|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|---|--|

For more information contact: Kikuko Chang

Email: [snowhavennewf@gmail.com](mailto:snowhavennewf@gmail.com)

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Best number to reach you \_\_\_\_\_

# of \_\_\_\_\_ Auscultation (\$65 NCA Members - \$70 Non NCA Members) = \$ \_\_\_\_\_

# of \_\_\_\_\_ Echocardiogram (\$325 NCA Members - \$350 Non NCA Members) = \$ \_\_\_\_\_

**Total Due \$ \_\_\_\_\_**



## OPHTHALMOLOGY (EYE) CLINIC INFORMATION FORM

*Deadline: April 11, 2025*

### PAYMENT METHODS:

|   |  |
|---|--|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee & will not constitute a valid reservation. |
|---|--|

For more information contact: Kikuko Chang

Email: [snowhavennewf@gmail.com](mailto:snowhavennewf@gmail.com)

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip/Country \_\_\_\_\_

Best number to reach you \_\_\_\_\_

# \_\_\_\_\_ of Exams at \$60 per exam for NCA Member – \$ \_\_\_\_\_

# \_\_\_\_\_ of Exams at \$65 for Non NCA Members = \$ \_\_\_\_\_

**Total Due \$ \_\_\_\_\_**

## MEETING ROOM REQUEST FORM

**Deadline: April 1, 2025**

**Return to:** Donna Thibault, 514 Bassetts Bridge Rd, Mansfield Center CT 06250 or [donnatbo@live.com](mailto:donnatbo@live.com)

**or complete this form on-line at** <https://store.ncanationalspecialty.org/shop>

Group or committee \_\_\_\_\_

Name contact person \_\_\_\_\_

Contact's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Day, date, and time of the meeting \_\_\_\_\_

Anticipated # of people attending: \_\_\_\_\_

Room set up instructions (including placement of chairs and tables and any equipment requested)

## VENDOR CONTRACT REQUEST FORM

Deadline: April 1, 2025

**Contact: Nicole Collins - Email: [nicole5158@gmail.com](mailto:nicole5158@gmail.com)**

A vendor contract may be requested by completing the form on-line at <https://store.ncanationalspecialty.org/shop>

If you are interested in renting vendor space at the 2025 National Specialty, please complete this form and return it to 2025 Vendor Chair – Nicole Collins, who will provide you with policies, pricing, and a contract.

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone Number: \_\_\_\_\_ Evening Phone Number: \_\_\_\_\_

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

Types of items to be sold: \_\_\_\_\_

## VOLUNTEER FORM

Deadline: April 15, 2025

Mail to: **Mary Bylone, 165 Shadbush Dr, Colchester CT 06415-1956 – email: [mbylone@gmail.com](mailto:mbylone@gmail.com)**  
or complete on-line at <https://store.ncanationalspecialty.org/shop>

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) \_\_\_\_\_ Email \_\_\_\_\_

Please check the area(s) in which you would like to help:

|                            |                                   |                        |
|----------------------------|-----------------------------------|------------------------|
| _____ Catalog Sales        | _____ CGC Test or _____ Trick Dog | _____ Communications   |
| _____ Conformation Steward | _____ Grounds                     | _____ Setup/Clean Up   |
| _____ Draft Test Steward   | _____ Auction/Brown Bag           | _____ Hospitality      |
|                            | _____ Banquet                     | _____ Speakeasy Lounge |
| _____ Logo Item Sales      | _____ Obedience/Rally Steward     | _____ Registration     |
| _____ Traffic Control      | _____ Trophy Table                | _____ Ring Favors      |

Other (please specify) \_\_\_\_\_

Please list days & times you would be available to help:

**FRIDAY NIGHT PRE-AUCTION MEAL**

**May 2, 2025**

**Deadline: April 1, 2025**

**PAYMENT METHODS:**

|   |   |
|---|---|
| <b>Credit Cards</b> – use online form found at _<br><a href="https://store.ncanationalspecialty.org/shop">https://store.ncanationalspecialty.org/shop</a> | <b>Checks</b> – Payable to <b>2025 NCA National Specialty</b><br>Mail check along with this form and a Payment Summary Order Form to:<br><b><u>John Affel – NCA Specialty, 5 Timber Lane, Saratoga Springs NY</u></b><br><b><u>12866</u></b><br><br><i>Please Note: All returned checks (NSF) will be charged a \$40 Service Fee &amp; will not constitute a valid reservation.</i> |
|---|---|

**Contact: Brenda Miele Soares – [brendamiele@outlook.com](mailto:brendamiele@outlook.com)**

Dinner will be light fare in a grab-n-go style to ensure you have plenty of time to check out the Brown Bag Raffle and the wonderful items that will be available at the Auction! Dinner will include choice of sandwich below, Oven Dried Tomato and Brie Pasta Salad, Fruit, Fresh Baked Cookies and beverage.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

# Mediterranean Tuna Salad w/Avocado on Multigrain Bread \_\_\_\_\_

# Grilled Seasonal Vegetable Wrap with Hummus \_\_\_\_\_

# Turkey, Smoked Gouda, and Hot House Tomato on Brioche Roll \_\_\_\_\_

Total # of Tickets \_\_\_\_\_ @ \$40.00 = **Total Due \$** \_\_\_\_\_