



ALL AMERICAN DOG REGISTRY INTERNATIONAL, LLC

CONFORMATION SHOW REGISTRATION

Show Selection

Show #: _____ ☐ Saturday SH1 ☐ Saturday SH2
☐ Sunday SH1 ☐ Sunday SH2

THIS FORM MUST BE COMPLETELY FILLED OUT AND SIGNED.

Dog & Owner Information

Dog's Name: _____
A.A.D.R.I. #: _____ Date of Birth: _____
Owner's Name: _____ Phone Number: _____
Address: _____ City: _____
State: _____ Zip: _____ E-mail: _____

Conformation Class

Regular Classes

☐ Male ☐ Female
☐ 4-6 Months ☐ 18-24 Months
☐ 6-9 Months ☐ 2-3 Years
☐ 9-12 Months ☐ 3-5 Years
☐ 12-18 Months ☐ 5 & Over

Champion Class

☐ Male ☐ Female
☐ Champion

Owner Certification & Liability Agreement

I certify that I am the owner of this dog or that I am the authorized agent for the actual owner of this dog. I am aware that any unprofessional conduct will forfeit participation & all entry fees. I personally assume all responsibility for all dogs that I have in my possession at this show. I hold harmless the All American Dog Registry International, LLC and all other parties from any claim, loss, or injury.

I will conduct myself in a professional manner and take full responsibility for my actions, my family, including all minor children, and my dogs. I certify that all my dogs have current rabies vaccinations and are current on all other vaccinations as well.

By signing below, I ASSUME ALL LIABILITY FOR MY DOG(S).

Signed: _____ Date: _____