Palmerston North Cat Club Inc

# Domestic Entry Form

**Sunday 4th May 2025**

(please circle or print)

|  |  |  |  |
| --- | --- | --- | --- |
| Exhibit’s Name:  |  | Registration No: |  |
| Group: Cat/Kitten  |  | Type: Longhair/Shorthair | Sex: Neuter/Spay  |  |
| Colour Group: (see attached chart) |  | Colour:(see attached chart) |  |
| Approximate Age: (or DOB if known)  |  |
| Owner’s Name:  |  |
| Address:  |  |
|  |  |
| Owner’s Registered Prefix (if any): |  | Phone No:  |  |
| Email Address: |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Cat Classes – please circle | **Neuter** | **Spay** |  | **Kitten Classes** – please circle | **Neuter** | **Spay** |
| Open Cat | 41 | 61 |  | Open Kitten | 51 | 71 |
| Junior (9 months – 2 years) | 42 | 62 |  | Kitten 4 – 6 months | 52 | 72 |
| Intermediate (2 years – 5 years) | 43 | 63 |  | Kitten 6 – 9 months | 53 | 73 |
| Senior (5 years – 7 years) | 44 | 64 |  |  |  |  |
| Veteran (7 years and over) | 45 | 65 |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| I/We consent to be bound by, and submit to the Constitution, By-Laws and Rules of the NZ Cat Fancy Inc and the Club as may be amended from time to time. A copy of NZCF Show Rules may be obtained as detailed in the schedule.I/We certify that the above named Cat/Kitten has been vaccinated.I/We certify that the above named Cat / Kitten has been de-sexed.I/We agree to allow printing of my/our name, email address, and prefix in the on sale catalogue.Signed: Date **I Offer my services as:** (please tick)[ ]  Steward [ ]  Handler [ ]  Scribe [ ]  Other **Large Cages:**[ ]  Cage hire requested for this exhibit (NOTE subject to availability)[ ]  I will provide a cage for this exhibit. Dimensions:  |  | Entry Fees (see schedule) | $ |
| Catalogue | $  |
| Donations | $  |
| Cage Hire | $  |
| Catalogue Advertising | $ |
| Sponsored Rosettes | $ |
|  |  |
| **Total** | **$** |
| **Account number for online payment**: 02-0630-0172405-000 |
|  |
| **OFFICE USE ONLY** |
| Date Received: | Amt Received: | Underpaid: | Overpaid: | Receipt No: |

