

# AEDCA National Specialty Bid

Year \_\_\_\_\_

Thank you for volunteering to chair an AEDCA National Specialty. The Show Chair should complete this form and submit to AEDCA Board for acceptance and approval. Please gather as much information as possible. \* Indicates Required fields.

Type of Specialty:

\_\_\_ Independent Specialty

\_\_\_ Concurrent Specialty

\_\_\_ Designated Specialty

\*Will this be a stand-alone National or be included within an all-breed show weekend? If included with an all-breed show, please include the host club information.

\_\_\_ Stand-Alone

\_\_\_ Included with Host Club.

Name of Host Club: \_\_\_\_\_

Name of Host Club Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Show or Host Club weekend: \_\_\_\_\_

Name of Show Venue: \_\_\_\_\_ City & State: \_\_\_\_\_

**\*Show Secretary or Superintendent Information:**

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

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

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

Website: \_\_\_\_\_

Show Committee Members: \_\_\_\_\_

\_\_\_\_\_

List the AEDCA members selected to be on the show committee. There must be a minimum of four (4) members, in addition to the Chair, but can have up to seven (7) members as needed.

The following committees may need to be included within the show committee: National Specialty operations, Trophies, Awards Banquet, Other Events (if offered), Fund Raising, Marketing and Advertising, Grounds and Facility, Parking, Hospitality, Merchandise, etc.

*Show Chair:		Role (if known)	Show Chair
*Member 1:		Role (if known)	
*Member 2:		Role (if known)	
*Member 3:		Role (if known)	
*Member 4:		Role (if known)	
Member 5:		Role (if known)	
Member 6:		Role (if known)	
Member 7:		Role (if known)	

Events offered:

Event	Yes	No	TBD	Event	Yes	No	TBD
Sweepstakes				Regional Specialty(ies)			
Veteran Sweepstakes				Designated Specialty(ies)			
Parade of Rescue				Supported Entry(ies)			
Parade of Titleholders				Obedience			
Futurity				Rally			
4-6 Month Puppy				Agility			
Auction/Raffle				Scent Work			
Health Clinic(s)				Barn Hunt			
Annual Meeting				Fast Cat/Lure Coursing			
Other (List):				Other (List):			

Please include any additional information you would like the board to consider. Things may include upgraded rosettes/ribbons provided by host club, free ring space from host club, free grooming or ability to group Eskies together, RV parking, host hotel, special attractions or events at this location, etc.

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By signing below, the Show Chair agrees to provide regular updates to the Board regarding progress and/or problems in any phase of show preparation. It is also understood that any major changes would negate this bid and a new bid would need to be submitted (i.e. change in date, location or show chair). The Committee is offered the freedom to “customize” the shows to reflect the area and committee members tastes. The Board is available should there be need for assistance.

\_\_\_\_ I have read and understand the AEDCA’s current National Specialty Show Policy

Show Chair Name (Printed): \_\_\_\_\_ Date: \_\_\_\_\_

Show Chair Name (Signature): \_\_\_\_\_

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

----For Club Use Only ----

Date Submitted		Date Approved	
Date Host Club Approved AEDCA		Host Club Contact Name	