

Eaton County Medical Care Facility

5th Annual Pet Show

530 Beech Street, Charlotte, MI 48813

517-543-2940



Friday, August 6th, 2010 4:00 PM to 8:00 PM

4:00 PM ... Food Concession Open

4:00 PM ... Vendors & Crafters Open for Business

6:15 PM ... Pet & Owner Check In

6:30 PM Pet Parade

6:40 PM Judging

8:00 PM Award Prizes

\$10.00 Pet Entry Fee

\$15.00 Vendor Table

Proceeds to benefit the Eaton County Medical Care Fund!

Contact Information:

Eaton County Medical Care Facility/ Beth West, 530 Beech St,

Charlotte, MI 48813

Rain Date: Saturday, August 7th, 2010 10:00 am to 1:00 pm

Eaton County Medical Care Facility Fifth Annual Pet Show - 2010 Registration Form

Name of Pet Owner:

Address of Pet Owner:

Phone No:

Cell No:

Email:

Name of Pet:




Type of Pet: (cat, dog, fish, etc.)

Waiver: I assume full responsibility for the actions of my pet. I will not hold Eaton County Medical Care Facility or Administration affiliated with the Pet Show responsible for accidents or damage done to myself or to my pet.

Signature:

Date Signed:

Please enclose the following items:

-  Proof of vaccination - updated shots, history as warranted for leashed/caged animals.
-  \$10.00 registration fee (check or money order payable to: **Eaton County Medical Care Facility**)
-  Above registration form with waiver signed.

Mail items by August 1, 2010 to:

Beth West - Eaton County Medical Care Facility, Pet Show

530 Beech Street, Charlotte, MI 48813

For questions, please call Beth West at: 517-543-2940

We look forward to seeing you at the ECMCF Sixth Annual Pet Show!

**EATON COUNTY MEDICAL CARE FACILITY
FIFTH ANNUAL PET SHOW - 2010 VENDORS REGISTRATION FORM**

Name of Vendor:

Address of Vendor:

Phone No:

Cell Phone:

Email:



Brief description of what will be on your table:

Waiver: I assume full responsibility for my actions.. I will not hold Eaton County Medical Care Facility or Administration affiliated with the Pet Show responsible for accidents or damage done to myself.

Signature of Business Owner:

Date Signed:

Please enclose the following items:

-  \$15.00 registration fee (**check or money order payable to: Eaton County Medical Care Facility**)
-  Above registration form with waiver signed.

Mail items in by August 1, 2010 to:

Beth West/ Eaton County Medical Care Facility, Pet Show
530 Beech St., Charlotte, MI 48813
517-543-2940

**EATON COUNTY MEDICAL CARE FACILITY
FIFTH ANNUAL PET SHOW - 2010 VENDORS REGISTRATION FORM**

Name of Vendor:

Address of Vendor:

Phone No:

Cell Phone:

Email:



Brief description of what will be on your table:

Waiver: I assume full responsibility for my actions.. I will not hold Eaton County Medical Care Facility or Administration affiliated with the Pet Show responsible for accidents or damage done to myself.

Signature of Business Owner:

Date Signed:

Please enclose the following items:

-  \$15.00 registration fee (**check or money order payable to: Eaton County Medical Care Facility**)
-  Above registration form with waiver signed.

Mail items in by August 1, 2010 to:

Beth West/ Eaton County Medical Care Facility, Pet Show
530 Beech St., Charlotte, MI 48813
517-543-2940

YES, I want to be a sponsor for Eaton County Medical Care Facility Fifth Annual Pet Show. Here's how I would like to contribute:

Main Sponsor **\$250.00**

**Gift in Kind (Suggested \$25.00 minimum
Donated Items _____
Cash Amount \$ _____**

Registered Table **\$15.00**

Total: \$ _____

(Checks can be made payable to Eaton County Medical Care Facility)

VITAL INFORMATION

Name of Business (AS YOU WOULD LIKE IT TO APPEAR ON POSTERS)

ADDRESS _____

PHONE _____

CONTACT PERSON _____

If registering a table, please provide a brief description of what will be on your table:

Signature of Business Owner **Date**

JUDGES

Special Activities

Prizes

- First Prize
- Runner Up
- Overall Third Place
- Best Behaved
- Best Dressed
- Best Personality
- Cutest Critter
- Most Mischievous
- Most Creative
- Most Cuddly
- Most Flamboyant
- Best Matching Pet/ Owner Outfits

- Coolest Cat
- Best Tricks
- Shyest
- Best Voice
- Best Dancer
- Most Mysterious
- Most Sophisticated
- Looks Most Like Owner

Start getting your pets ready for the 5th Annual Pet Show at

Eaton County Medical Care Facility

We are asking for Pre-registration contestants.

All pets must have proof of vaccinations prior to show.

Domesticated pets only. One pet per owner. All pets must be leashed or in cages.

