	KENNEL CLUB FORM	Armband #	
Monarch K	<u>ennel Club</u>		
☐ - #1 Friday, June 16, 2017	 Unlimited Entry 		st (All fees in CDN USD)
Saturday and Sunday Shows		snow Bab	ntry Fee: \$ 30.00 y Puppy Fee \$ 10.00
□ - #2 Saturday, June 17/17	🖵 - #4 Sunday, Ju	ne 18/17 <u>L</u>	isting Fee: \$ 9.70
□ - #3 Saturday, June 17/17	⊔ - #5 Sunday, Ju	ne 18/17 Other F	ees: Exhibition, \$ 15.00
☐ Thames Valley Doberman Pinscher Club - Saturday June 17, 2017			
■MKC - Pre Paid a	and Pre Ordered C	atalogue \$ 6.00 CI	ON / USD
Please Make ALL Cheques Payable to Monarch Kennel Club Entries Close: Wednesday May 31/17 8pm			
	Regular Classe		
, , ,	2-18 month	☐ Open	
117 (- /	anadian Bred	☐ Specials On	ly
	red By Exhibitor		
Non Regular Classes; ☐ Baby Puppy (3-6 mth Monarch Show # 2 and Show # 4 Only) ☐ Exhibition Only			
Specialty Regular Additional Classes; □ Veteran			
Specialty Non – Regular classes; ☐ Baby Puppy (3-6 mth), ☐ Stud Dog, ☐ Brood Bitch			
Saturday Sunday- Yes I wish to compete/participate in the			
Best Bred By Exhibitor Competition Show # 3 & 5 BREED SEX: ☐ MALE OR ☐ FEMALE			
BREED		SEX: U IVIAL	E OR UFEMALE
REGISTERED NAME OF DOG			
Check One & Enter Number Here	D / 05 D: // -		Is This A Puppy?
□ CKC Reg #		Please Circle Month	☐Yes or ☐No
CKC PEN #		□Apr □May □June	PLACE OF BIRTH?
CKC ERN #	□July □Aug □Sep	t □Oct □Nov □Dec	Canada
□ CKC Misc Cert.# □ LISTED	Day `	Year	Elsewhere
BREEDER(S)	L		
BREEDER(S) SIRE	1		
SIRE			
SIRE DAM			
SIRE DAM REGISTERED OWNER(S)	ATE P	OSTAL CODE/ZIP	
SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS		OSTAL CODE/ZIP	
SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS CITY PROV/STA		OSTAL CODE/ZIP	
SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS CITY PROV/STA NAME OF OWNERS AGENT (IF ANY) A	T THE SHOW	OSTAL CODE/ZIP	
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SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS CITY PROV/STA NAME OF OWNERS AGENT (IF ANY) A' AGENT'S ADDRESS CITY PROV/STA	TTHE SHOW ATE D to: OWNER dog or that I am the authorized and this entry. In Considera ennel Club and any additional	OSTAL CODE/ZIP Or AGENT I agent of the Owner(s) whose attorn of the acceptance of this acceptance of this s. Directors, Employees, or Ag	entry, I (we) agree to be bound g in the premium list. Also, by
SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS CITY PROV/STA NAME OF OWNERS AGENT (IF ANY) A' AGENT'S ADDRESS CITY PROV/STA Mail IC I certify that I am the registered Owner(s) of the and accept full responsibility for all statements by the rules and regulations of the Canadian K	T THE SHOW TO THE	OSTAL CODE/ZIP Or AGENT If agent of the Owner(s) whose trules and regulations appearing s, Directors, Employees, or Agrer caused.	entry, I (we) agree to be bound g in the premium list. Also, by
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SIRE DAM REGISTERED OWNER(S) OWNER'S ADDRESS CITY PROV/STA AGENT'S ADDRESS CITY PROV/STA Gent's Address CITY PROV/STA Mail ID I certify that I am the registered Owner(s) of the and accept full responsibility for all statements rough by the rules and regulations of the Canadian K signing this form I certify that I will not hold the Signature of Agent or Owner a \$ 5.00 non- refund.	TTHE SHOW ATE Doto: OWNER dog or that I am the authorized nade in this entry. In Consider ennel Club and any additional Show giving Club, it's member accident or misfortune hower accident	OSTAL CODE/ZIP Or □AGENT I agent of the Owner(s) whose tition of the acceptance of this crules and regulations appearin s, Directors, Employees, or Agiver caused. Umber Il Interact E-Transfer Paynnel Club.	entry, I (we) agree to be bound g in the premium list. Also, by ents, liable in the event of any Email address vments
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Email your entry form as an attachment and pay with an interact e-transfer

Remember if you sent entry electronically follow up to see that it did arrive, be safe and check.

Email: colmar@cogeco.ca

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