	NEWFOUNDLAND DOG
	CLUB OF CANADA BC REGION
OFFICI	IAL CANADIAN KENNEL CLUB ENTRY FORM
UTICI	Newfoundland Dog Club of Canada
ALL BI	REED Limited Entry Draft Test NDD Event #2320223293
	DD/BDDEvent #2320223293
Saturday A	DDX/BDDX Event #2320223294 ct. 14, 2023 – ENTRIES CLOSE: 6:00 PM PDT, Sept. 15, 2023
ENTRY FEE \$	TCN Fee (if applicable): \$10.50 TOTAL ENTRY FEE \$
	anadian or US Funds per entry. A Brace is one entry – please fill out two
	ace and attach together. Day of entries are allowed if places available.
	npetition Number FEE * \$10.50 for <i>entries that do not have a CKC number</i> . payable, to: Newfoundland Dog Club of Canada – BC Region
An ices	Mail entry with payment to:
Grace Ec	dwards, 5399 Sunnybrae Canoe Pt. Rd. Tappen, BC V0E 2X1
Reg'd Name of Dog:	
Call Name:	Breed:
	$\Box$ Female (If Female, will she be in season on test day? $\Box$ Yes $\Box$ No
	DRAFT DOG DRAFT DOG DRAFT DOG EXCELLENT DRAFT DOG EXCELLENT RE-QUALIFICATION
	of brace teams, fill out separate entry form for each dog.
	DDX entries do not fill they will be replaced with 2 DD entries.
	$M_{\underline{Y}} = M_{\underline{Y}}$ Place of Birth: $\Box$ Canada $\Box$ Elsewhere
□ CKC Reg. #	$\Box$ CKC ERN #
$\Box$ CKC Misc.(MCN) Cer	t. # □ CKC Pen #   CCN Canine Companion # □ CKC Pen #
$\Box C$	CN Canine Companion #
Dieedei(s).	
Sire:	
Dam:	
Dam	
Reg'd Owner(s):	_CKC#
Owner's Address:	
City:	Prov.: Postal Code
ony:	
E-Mail:	
Name of Owner's Agent (i	f any) at Test:
I certify that I am the regist	ered owner(s) of the dog or that I am the authorized agent of the owner(s) whose
name(s) I have entered	above and accept full responsibility for all statements made in this entry. In
	otance of this entry, I (we) agree to be bound by the rules and regulations of the
Canadian Kennel Clul	b and by any additional rules and regulations appearing in the premium list.
Signatures(s):	Phone: