

93rd CANADIAN NATIONAL SPECIALTY SHOW
&
OBEDIENCE TRIALS



SEPTEMBER 18th - 19th, 2015
ENTRIES CLOSE 8:00 PM
WEDNESDAY, AUGUST 26, 2015

Trial # 1 2 3 4

I ENCLOSE \$ _____ FOR ENTRY FEES \$ _____ LISTING FEES \$ _____

PLEASE TYPE OR PRINT CLEARLY

BREED	VARIETY	SEX
Enter in the following classes:		JUMPS: HEIGHT _____ WIDTH _____

REG. NAME OF DOG

CHECK ONE - AND - ENTER NUMBER HERE

- CKC REG. Number
 CKC ERN number
 CKC MISC. CERT. Number
 LISTED
 FOREIGN number & COUNTRY

DATE OF BIRTH

D ___ M ___ Y ___

IS THIS A PUPPY?

YES NO

PLACE OF BIRTH

CANADA _____ ELSEWHERE _____

BREEDER(S)

SIRE

DAM

REG'D OWNER(S)

OWNER'S ADDRESS

CITY

PROVINCE

POSTAL
CODE

NAME OF OWNER'S AGENT
(IF ANY) AT THE SHOW

AGENT'S ADDRESS

CITY

PROVINCE

POSTAL
CODE

Visa _____ MasterCard _____ American Express _____

Card number _____

Expiry _____ Name of Card Holder _____

I CERTIFY that I am the registered 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 consideration of the acceptance of this entry, I (we) agree to be bound by the rules and regulations of the Canadian Kennel Club and by any additional rules and regulations appearing in the premium list.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.

Email Address: _____