



OFFICIAL CANADIAN KENNEL CLUB FORM
LIMITED ENTRY **O**BEDIENCE TRIALS
MUSKOKA DISTRICT KENNEL CLUB

Closing date Oct 11/13 at 8 p.m. or when limit reached
Fees payable to **MDKC**
\$28.00 per entry
3 entries same dog \$75
4 entries same dog \$100
DAY OF \$32.00 per entry

<input type="checkbox"/> Trial 1 Sat. Oct 26/13	ENTRY FEE \$ _____
<input type="checkbox"/> Trial 2 Sat. Oct 26/13	LISTING FEE \$ _____
<input type="checkbox"/> Trial 3 Sun. Oct 27/13	Exhibition only \$ _____
<input type="checkbox"/> Trial 4 Sun. Oct 27/13	Total \$ _____

BREED
SEX-male ___ female ___

Enter in following class:
 Novice A Open A Utility A
 Novice B Open B Utility B
 Novice C Novice Pre-Novice
 Intermediate
 Exhibition only

Jumps
 Height _____
 Width _____

REGISTERED NAME OF DOG:

<input type="checkbox"/> CKC Reg. No.	Date of Birth:
<input type="checkbox"/> CKC ERN No.	D_____ M_____ Y _____
<input type="checkbox"/> CKC Misc. Cert. No.	Place of Birth:
<input type="checkbox"/> Listed	Canada _____ Elsewhere _____

Breeder(s)

Sire:

Dam:

Reg'd Owner (s)

Owner's Address

City	Prov.	Code
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Agent

Address

City	Prov.	Code
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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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

Signature of owner or agent _____ telephone _____

Contact Owner Agent Email: _____



OFFICIAL CANADIAN KENNEL CLUB FORM
LIMITED ENTRY **R**ALLY **O**BEDIENCE
MUSKOKA DISTRICT KENNEL CLUB

Closing date Oct 11/13 at 8 p.m. or when limit reached
Fees payable to **MDKC**
\$28.00 per entry
3 entries same dog \$75
4 entries same dog \$100
DAY OF \$32.00 per entry

<input type="checkbox"/> Trial # 1 Fri. Oct 25/13	ENTRY FEE \$ _____
<input type="checkbox"/> Trial # 2 Sat. Oct 26/13	LISTING FEE \$ _____
<input type="checkbox"/> Trial # 3 Sun. Oct 27/13	Exhibition only \$ _____
	Total \$ _____

BREED
SEX-male ___ female ___

Enter in following class:
 Novice A Advanced A Excellent A
 Novice B Advanced B Excellent B
 Exhibition only

Jumps
 Height _____
 Width _____

REGISTERED NAME OF DOG:

<input type="checkbox"/> CKC Reg. No.	Date of Birth:
<input type="checkbox"/> CKC ERN No.	D_____ M_____ Y _____
<input type="checkbox"/> CKC Misc. Cert. No.	Place of Birth:
<input type="checkbox"/> Listed	Canada _____ Elsewhere _____

Breeder(s)

Sire:

Dam:

Reg'd Owner (s)

Owner's Address

City	Prov.	Code
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Agent

Address

City	Prov.	Code
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