

**OFFICIAL CANADIAN KENNEL CLUB FORM - OBEDIENCE
ALL BREED OBEDIENCE & RALLY TRIAL - Friday, August 16, 2024**



Enter online at dogshow.ca for the Dalmatian Club of Canada Trial

or mail to DCC c/o 76 Alexandria Bay, Morden, MB R6M 2C4

All Breed Indoor Obedience & Rally Obedience Trials –Friday, August 16, 2024
Hosted by the Dalmatian Club of Canada

Entry Fee - \$33.00 per class or \$30 if entered in all of DCC & MCA trials. Ex. Only - \$10.00 TCN Fee - \$10.50

FEES: Entry _____ TCN Fee _____ Total Fee _____

Breed	Variety	Sex
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<input type="checkbox"/> Pre Novice	<input type="checkbox"/> Novice A	Rally Obedience	
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice A	<input type="checkbox"/> Novice B
<input type="checkbox"/> Novice Intermediate	<input type="checkbox"/> Open 18A	<input type="checkbox"/> Advanced A	<input type="checkbox"/> Advanced B
<input type="checkbox"/> Open HA	<input type="checkbox"/> Open 18B	<input type="checkbox"/> Excellent A	<input type="checkbox"/> Excellent B
<input type="checkbox"/> Open HB	<input type="checkbox"/> Utility B	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Masters
<input type="checkbox"/> Utility A			Height _____
			Length _____
			Rally Height _____

Registered Name of Dog

Check One Enter Number Here

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. Cert. No.
- TCN Number
- PEN No.

Date of Birth
Day _____ Month _____ Year _____

Place of Birth
Canada _____ Elsewhere _____

Breeder(s)
Sire
Dam
Name of Reg'd Owner(s)
Owner's Address
City Prov/State Code
Name of Agent, if any
Agent's Address
City Prov/State Code

Mail Acknowledgements to: Owner Agent

IF APPLICABLE, FEES MAY BE CHARGED TO: Visa Mastercard

Card Number _____

Cardholder's Name _____ Expiry Date _____

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 agree to be bound by the rules and regulations of the Canadian Kennel Club and by any additional rules and regulations appearing in this premium list. I also agree by supplying my credit card number that I hereby allow DogShow.ca to charge my entry fees plus their handling fee to my credit card.

Telephone # _____

Signature of Owner or Agent _____

Email Address _____

OFFICIAL CANADIAN KENNEL CLUB FORM - OBEDIENCE
ALL BREED MCA OBEDIENCE & RALLY TRIALS - Saturday & Sunday, August 17 & 18, 2024

Enter online at dogshow.ca at the Manitoba Canine Association Trials

or mail to MCA c/o 76 Alexandria Bay, Morden, MB R6M 2C4



Saturday, August 17, 2024 Sunday, August 18, 2024

Entry Fee - \$33.00 per class or \$30 if entered in all of DCC & MCA trials. Ex. Only - \$10.00 TCN Fee - \$10.50

FEES: Entry _____ TCN Fee _____ Total Fee _____

Breed	Variety	Sex
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<input type="checkbox"/> Pre Novice <input type="checkbox"/> Novice B <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Open HA <input type="checkbox"/> Open HB <input type="checkbox"/> Utility A	<input type="checkbox"/> Novice A <input type="checkbox"/> Novice C <input type="checkbox"/> Open 18A <input type="checkbox"/> Open 18B <input type="checkbox"/> Utility B	Rally Obedience <input type="checkbox"/> Novice A <input type="checkbox"/> Advanced A <input type="checkbox"/> Excellent A <input type="checkbox"/> Intermediate	<input type="checkbox"/> Novice B <input type="checkbox"/> Advanced B <input type="checkbox"/> Excellent B <input type="checkbox"/> Masters	Height _____ Length _____ Rally Height _____ _____
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Registered Name of Dog

Check One	Enter Number Here	
<input type="checkbox"/> CKC Reg. No.		Date of Birth
<input type="checkbox"/> CKC ERN No.		Day _____ Month _____ Year _____
<input type="checkbox"/> CKC Misc. Cert. No.		
<input type="checkbox"/> TCN Number		Place of Birth
<input type="checkbox"/> PEN No.		Canada _____ Elsewhere _____

Breeder(s)
Sire
Dam
Name of Reg'd Owner(s)
Owner's Address
City _____ Prov/State _____ Code _____
Name of Agent, if any
Agent's Address
City _____ Prov/State _____ Code _____

Mail Acknowledgements to: Owner Agent

IF APPLICABLE, FEES MAY BE CHARGED TO: Visa Mastercard

Card Number _____

Cardholder's Name _____ Expiry Date _____

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Telephone # _____

Signature of Owner or Agent _____

Email Address _____