

OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM CONFORMATION & RALLY OBEDIENCE LETHBRIDGE & DISTRICT KENNEL CLUB	OFFICE USE
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Rally Obedience	Conformation	Obedience
<input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	Entry Fee _____ Listing Fee _____ Prepaid Catalogue _____ Total _____ <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	Entry Fee _____ Listing Fee _____ Prepaid Catalogue _____ Total _____ <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday

BREED	VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ENTER IN THE FOLLOWING CLASSES:		
RALLY OBEDIENCE <input type="checkbox"/> NOVICE A (R.N.) <input type="checkbox"/> NOVICE B (R.N.) <input type="checkbox"/> INTERMEDIATE (R.I.) <input type="checkbox"/> ADVANCED "A" (R.A.) <input type="checkbox"/> ADVANCED "B" (R.A.) <input type="checkbox"/> EXCELLENT "A" (R.E.) <input type="checkbox"/> EXCELLENT "B" (R.E.)	CONFORMATION <input type="checkbox"/> JUNIOR PUPPY <input type="checkbox"/> SENIOR PUPPY <input type="checkbox"/> 12 - 18 MONTH <input type="checkbox"/> CANADIAN BRED <input type="checkbox"/> BRED BY EXHIBITOR <input type="checkbox"/> OPEN <input type="checkbox"/> SPECIALS ONLY <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> EXHIBITION ONLY (3-6 Mo.)	<input type="checkbox"/> BABY PUPPY (SAT & SUN) <input type="checkbox"/> VETERANS (SAT & SUN) JUVENILE SWEEPS - SATURDAY <input type="checkbox"/> 3 - 6 MONTHS <input type="checkbox"/> 6 - 9 MONTHS <input type="checkbox"/> 9 - 12 MONTHS <input type="checkbox"/> 12-18 MONTHS

REG'D. NAME OF DOG

CHECK ONE & ENTER NUMBER BELOW: <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC CCN NO.	DATE OF BIRTH _____ / _____ / _____ Day / Month / Year	ON SHOW DATE IS THIS A PUPPY? <input type="checkbox"/> YES <input type="checkbox"/> NO
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NUMBER:	PLACE OF BIRTH	<input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE
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BREEDER(S)

SIRE

DAM

REG'D OWNER(S)	CKC MEMBERSHIP #
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OWNER'S ADDRESS

CITY	PROV./STATE	POSTAL CODE
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NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW

AGENT'S ADDRESS

CITY	PROV./STATE	POSTAL CODE
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IDs will not be mailed – please supply email address below for entry confirmation

VISA MASTERCARD AMERICAN EXPRESS

CARD NO. _____ **EXPIRY** _____ / _____

CARDHOLDER NAME (PLEASE PRINT) _____

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 _____

E-MAIL ADDRESS: _____ **TELEPHONE NUMBER** _____

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REG'D. NAME OF DOG

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