

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

Prince Albert Kennel and Obedience Club

Mail Entries to: Kerrie Proudlove
129-16 St West, Prince Albert, SK S6V 3V2
Make cheques payable to: PAKOC

Show dates: Aug 28,29,30, 2023

Mail In Entries close: July 21, 2023 noon CST or when 25 mail in entries are received, whichever occurs first.
Online entries close Aug 13, 2023 noon CST or when Shows Fill whichever occurs first.



Entry Fees \$ _____ +TCN Fees \$ _____ + Pre-paid Catalogue \$ _____ = TOTAL \$ _____

PLEASE PRINT OR TYPE CLEARLY

Monday (Aug 28) Tuesday (Aug 29) Wed (Aug 30)

Show 1 Show 3 Show 5

Show 2 Show 4 Show 6

Enter in the Following Classes

Conformation Classes

_____ Baby Puppy (Show1,3,5) _____ Junior Puppy _____ Senior Puppy

_____ 12-18 months _____ Bred by Exhibitor _____ Open _____ Specials

_____ Veterans (Show,2,4,6) _____ Altered _____ Exhibition Only

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BREED	VARIETY	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female
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Reg. Name of Dog (CKC Titles ONLY please)

Check one & Enter CKC Number: <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. NUMBER:	<input type="checkbox"/> CKC PEN. No. <input type="checkbox"/> CKC Companion Number <input type="checkbox"/> TCN No.	DOB _____ / _____ / _____ Day Month Year	On the show Date is this a PUPPY? _____ YES _____ NO
		PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE	

BREEDER(S)

SIRE

DAM

REG. OWNER(S)

OWNER(S) ADDRESS

CITY: _____ **PROV./STATE:** _____ **POSTAL CODE:** _____

Telephone Number _____ **CKC Membership #** _____

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

AGENT'S ADDRESS

CITY: _____ **PROV./STATE:** _____ **POSTAL CODE:** _____

IDS WILL NOT BE MAILED- PLEASE SUPPLY EMAIL ADDRESS BELOW FOR ENTRY CONFIRMATION

Email Address to send confirmation to

_____ VISA _____ MASTERCARD

Card No. _____ **EXPIRY** _____ / _____

CARDHOLDER'S NAME (PLEASE PRINT) _____

AUTHORIZATION & GENERAL AGREEMENT

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 abide by the rules and regulations of the Canadian Kennel Club and by an additional rules and regulations appearing in the premium list.

Signature of Owner, Agent, Handler: X _____ **Date:** _____ **Email** _____

Signature of parent/guardian is required for children under 18 years