

Official Canadian Kennel Club Entry Form

Administrative use only

Moncton Kennel Club

Nov 17 & 18, 2018

| | fees: x \$28.0 ry fees: x \$18.0 | 00 = | | | | | | |
|--|-------------------------------------|--------|----------------|------------------|--|--|--|--|
| [] Show 3 | i & Daby i up | | Fees: x \$10.5 | | | | | |
| [] Show 3 | | - | | 00 = | | | | |
| [1.0-t-l | | Ex. Or | • | | | | | |
| [] Catalog | | Catalo | og: x \$ 8.0 | 00 = | | | | |
| Cheques to: Moncton Kennel Club | Т | OTAL: | | | | | | |
| Please Print or type CLEARLY | | | | | | | | |
| Enter in one only of the following classes | | | | | | | | |
| CONFORMATION | | | | | | | | |
| [] 3-6 Month Puppy [] Canadian Bred |] t |] Alte | ered | | | | | |
| [] Junior Puppy [] Bred By Exhib | | - | teran | | | | | |
| 1 | | • | | | | | | |
| [] Senior Puppy [] Open | [|] EXI | hibition Only | | | | | |
| [] 12-18 Month [] Specials Only | | | | | | | | |
| | | | | | | | | |
| BREED | | V | ARIETY | SEX | | | | |
| NAME OF DOG | | | | | | | | |
| NAME OF BOG | D | ate Of | Birth | Is this a puppy? | | | | |
| Check one & enter Reg # here | ٦ | u.o o. | J | io uno a pappy. | | | | |
| CKC Reg # | _ | | | YES NO | | | | |
| CKC ERN # | | Day | Month Year | | | | | |
| CKC MSC # | _ | | | | | | | |
| Listed | P | lace O | f Birth Canada | a Elsewhere | | | | |
| PREFICE | | | | | | | | |
| BREEDER SIRE | | | | | | | | |
| DAM | | | | | | | | |
| REG. OWNER | | | | | | | | |
| OWNER ADDRESS | | | | | | | | |
| CITY | PROV | | POST CODE | | | | | |
| AGENT NAME | | | | | | | | |
| AGENT ADDRESS | | | | | | | | |
| CITY | PROV | | POST CODE | | | | | |
| Mail ID to: OWN | NER or | _ | AGENT | | | | | |
| I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused. | | | | | | | | |
| Signature of agent or owner | | | Phone Number | er | | | | |
| Email: | | | | _ | | | | |

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| Moncton Ker Nov 17 & 18, 2 | | ub | | | | | |
|---|--|---|--|--|--|--|--|
| [] Show 2 Veteran [] Show 3 | • | ppy Entry fo Listing F Ex. Only | | 00 = 50 = 00 = | | | |
| [] Catalog Cheques to: | | Catalog: | x \$ 8.0 | 00 = | | | |
| Moncton Kennel Club TOTAL: Please Print or type CLEARLY | | | | | | | |
| Enter in one only of the following classes | iiii oi typ | e CLEAR | _ T | | | | |
| CONFORMATION [] 3-6 Month Puppy [] Canadian Bred [] Junior Puppy [] Bred By Exhib [] Senior Puppy [] Open [] 12-18 Month [] Specials Only | | [] Altere | | | | | |
| BREED | | VAR | RIETY | SEX | | | |
| NAME OF DOG | | 1 - 7 | ·· · | 10-2 | | | |
| NAME OF DOG | | Date Of Bi | rth | Is this a puppy? | | | |
| Check one & enter Reg # here CKC Reg # CKC ERN # CKC MSC # | | Day M | onth Year | YES NO | | | |
| Listed | | Place Of Birth Canada Elsewhere | | | | | |
| BREEDER | | | | | | | |
| SIRE | | | | | | | |
| DAM | | | | | | | |
| REG. OWNER | | | | | | | |
| OWNER ADDRESS | | | Τ | | | | |
| CITY | PROV | | POST CODE | | | | |
| AGENT NAME | | | | | | | |
| AGENT ADDRESS | | | | | | | |
| СІТҮ | PROV | | POST CODE | | | | |
| Mail ID to: OWN | | | AGENT | | | | |
| I CERTIFY that I am the registered owner(s) of this dog or I have entered above and accept full responsibility for all st I(we) agree to be bound by the rules and regulations of the appearing in the premium list.Also, by signing this form I Employees or Agents liable in the event of any accident or | atements mad Canadian Fed certify that I w | e in this entry. eration of Cana ill not hold the | In consideration of the ida and by any addition | acceptance of this entry, nal rules and regulations | | | |
| Signature of agent or owner | | | Phone Number | er | | | |
| Email: | | | | _ | | | |