



**LIMITED ENTRY OBEDIENCE & RALLY TRIALS**

**GEORGINA KENNEL & OBEDIENCE CLUB**

**RALLY OBEDIENCE**

**OBEDIENCE**

- Fri. November 13**  
 Trial #1  Trial #2  
**Sat. November 14**  
 Trial #3  Trial #4  
**Sun. November 15**  
 Trial #5  Trial #6

- Sat. November 14**  
 Trial #1  Trial #2  
**Sun. November 15**  
 Trial #3  Trial #4

ENTRY FEES \$ \_\_\_\_\_  
 (\$30.00 per trial)  
 LISTING FEES \$ \_\_\_\_\_  
 (\$9.60 per trial)  
 EXHIBITION ONLY \$ \_\_\_\_\_  
 (\$10.00)  
 Prepaid Catalogue \$ \_\_\_\_\_  
 (\$8.00 each)  
 TOTAL enclosed \$ \_\_\_\_\_

CLOSING DATE: 8:00 p.m.

Monday, November 2, 2015

Make fees payable to

**Georgina Kennel & Obedience Club**

and mail to:

MJN Show Services

9 Samya Court

Scarborough, ON M1R 2A4

*Please type or print clearly*

Breed	Variety	Sex
Enter in the following Classes: <input type="checkbox"/> Novice A <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Novice B <input type="checkbox"/> Novice C <input type="checkbox"/> Open A <input type="checkbox"/> Pre-Novice <input type="checkbox"/> Open B <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Utility A <input type="checkbox"/> Utility B	<input type="checkbox"/> Rally Novice A <input type="checkbox"/> Rally Novice B <input type="checkbox"/> Rally Intermediate <input type="checkbox"/> Rally Advanced A <input type="checkbox"/> Rally Advanced B <input type="checkbox"/> Rally Excellent A <input type="checkbox"/> Rally Excellent B	Rally Jump Heights (Advanced/Excellent) <input type="checkbox"/> Under 10" (6"/12") <input type="checkbox"/> 10" and under 15" (8"/16") <input type="checkbox"/> 15" and under 20" (12"/24") <input type="checkbox"/> 20" and over (16"/32") Obedience Jumps: Height _____ Width _____

Reg. Name of Dog

Check One – and – Enter Number here

- CKC Reg. No.  
 CKC ERN No.  
 CKC Misc. Cert. No.  
 Listed

Date of Birth	Is this a puppy?
D _____ M _____ Y _____	YES ___ NO ___

Place of Birth
<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Code
------	-------	------

Name of Owner's Agent (if any)

at the Trial

Agent's Address

City	Prov.	Code
------	-------	------

Mail I.D. to  Owner or  Agent Email \_\_\_\_\_

<b>FAX/CREDIT CARD ENTRIES</b>	
<input type="checkbox"/> AMEX <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA	Card No. _____ Expiry _____
Name of Cardholder _____	Signature _____

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 NO.