



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM  
**KINGSTON & DISTRICT KENNEL CLUB**

Mail to: Diana Edwards Show Services  
 1562 Route 203, Howick, QC J0S 1G0



- Ottawa Valley Kennel Club - Saturday June 18, 2016  
 Whippet Club of Eastern Canada - Saturday, June 18, 2016  
 **CAMPING FEE: \$60 - Please pay with your entries**

I ENCLOSE \$ \_\_\_\_\_ FOR TOTAL ENTRY FEES

Breed	Variety	Sex
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- Enter in the following classes:  Multi Generational
- |  |  |   |                                       |   |
|--|--|---|---------------------------------------|---|
| <input type="checkbox"/> Baby Puppy    | <input type="checkbox"/> Bred By Exhibitor | <input type="checkbox"/> Stud Dog               | <input type="checkbox"/> Sweeps 3-6   | <input type="checkbox"/> Vet.Sweeps 7-9 |
| <input type="checkbox"/> Junior Puppy  | <input type="checkbox"/> Open              | <input type="checkbox"/> Brood Bitch            | <input type="checkbox"/> Sweeps 6-9   | <input type="checkbox"/> Vet.Sweeps 10+ |
| <input type="checkbox"/> Senior Puppy  | <input type="checkbox"/> Veterans          | <input type="checkbox"/> Brace                  | <input type="checkbox"/> Sweeps 9-12  |   |
| <input type="checkbox"/> 12-18 Months  | <input type="checkbox"/> Specials Only     | <input type="checkbox"/> Field Dog Class        | <input type="checkbox"/> Sweeps 12-18 |   |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Exhibition Only   | <input type="checkbox"/> Parade of Titleholders |                                       |   |

Reg.Name of Dog \_\_\_\_\_

Check One and Enter Number Here      Date of Birth      Is this a Puppy?  
 C.K.C.Reg.No.      D\_\_\_\_M\_\_\_\_Y\_\_\_\_       YES  NO  
 C.K.C.ERN No.  
 C.K..C.Misc.Cert.No.      Place of Birth  
 Listed (no C.K.C.No.)       Canada  Elsewhere

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner(s) Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Name of Owner's Agent (if any) at the Show) \_\_\_\_\_

Agent's Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Mail I.D.to

- Owner.  
 Agent

\_\_\_\_\_  
 SIGNATURE OF OWNER OR AGENT

\_\_\_\_\_  
 TELEPHONE NO.

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.

Email: \_\_\_\_\_

**FAX SERVICES - VISA / Mastercard / Amex (450) 825-0894**

Card number: \_\_\_\_\_ Expiry date \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_ Security Code \_\_\_\_\_