

Office Use Only

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Official Entry Form  
(GROUP SPECIALTY CONFORMATION SHOW)



**ENTRIES CLOSE: WEDNESDAY, JUNE 29, 2016 @ 9:00pm PDT**

Sat (July 16) \_\_\_ Sun (July 17) \_\_\_

Cheques made payable to Sporting Dog Spectacular  
Mail to Classic Show Services #88-30989 Westridge Place Abbotsford, B.C. V2T 0E7 (604)-845-9510  
Online and fax entry information at [www.dogshow.ca](http://www.dogshow.ca)

Entry Fee \$ \_\_\_\_\_ Listing Fee \$ \_\_\_\_\_  
Catalog \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Field	Juvenile Sweepstakes (Sat):
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Specials Only	<input type="checkbox"/> 3-under 6mos <input type="checkbox"/> 6-under 9mos <input type="checkbox"/> 9-under 12mos <input type="checkbox"/> 12 to under 18mos
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Veteran (7 under10)	<input type="checkbox"/> Baby Puppy (Sat & Sun)	Veteran Sweepstakes (Sat):
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Veteran (10+ yrs)	<input type="checkbox"/> Exhibit Only	<input type="checkbox"/> 7 & under 10yrs <input type="checkbox"/> 10+ yrs

**DOG INFORMATION** \*\*\*please print clearly\*\*\*

Breed \_\_\_\_\_ Variety \_\_\_\_\_  Male  Female

Reg'd Name of Dog \_\_\_\_\_

CKC Reg #  CKC Misc. #  
 CKC ERN #  LISTED

Insert # Here \_\_\_\_\_

Date Of Birth \_\_\_\_\_ Place of Birth:  Canada  Yes  
 Elsewhere  No

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

Sire \_\_\_\_\_

Dam \_\_\_\_\_

**OWNER/AGENT INFORMATION**

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

Agent \_\_\_\_\_

Owner's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

VISA  Mastercard  American Express A service charge of 10% will be assessed.

Credit Card # \_\_\_\_\_ Exp.Date \_\_\_\_\_ Name of Cardholder \_\_\_\_\_

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 the consideration of the acceptance of this entry, I 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/Agent \_\_\_\_\_ Ph.# ( ) \_\_\_\_\_

Email Address (required) \_\_\_\_\_