

	Official Canadian Kennel Club Entry Form Halifax Kennel Club	Administrative use only
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<input type="checkbox"/> Show 1 (Fri) (Limited entry)	Entry fees: ___ x \$30.00 = _____		
<input type="checkbox"/> Show 2 (Fri) (Limited entry)	Entry fees BP: ___ x \$20.00 = _____		
<input type="checkbox"/> Show 3 (Sat)	Entry fees: Sweeps ___ x \$15.00 = _____		
<input type="checkbox"/> Show 2 (Sun)	Listing Fees: ___ x \$11.50 = _____		
<input type="checkbox"/> Show 5 (Mon)	Ex. Only: ___ x \$ 8.00 = _____		
	Catalog: ___ x \$ 8.00 = _____		
<input type="checkbox"/> Catalog	Total: _____		

Please Print or type CLEARLY

Enter in one only of the following classes			
CONFORMATION		SWEEPSTAKES (Monday)	
<input type="checkbox"/> 3-6 Month Puppy	<input type="checkbox"/> Canadian Bred	Puppy	Veteran
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> 6-9 months	<input type="checkbox"/> 7 up to 9 years
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> 9-12 months	<input type="checkbox"/> 9 up to 11 years
<input type="checkbox"/> 12-18 Month	<input type="checkbox"/> Specials Only	<input type="checkbox"/> 12-18 months	<input type="checkbox"/> 11 years and older
	<input type="checkbox"/> Exhibition Only		

BREED	VARIETY	SEX
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NAME OF DOG		
Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC MSC # _____ ___ Listed	Date Of Birth _____ Day Month Year	Is this a puppy? YES ___ NO ___
Place Of Birth ___ Canada ___ Elsewhere		

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME


AGENT ADDRESS

CITY	PROV	POST CODE
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Mail ID to: ___ OWNER 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 _____
Email: _____	

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