



OFFICIAL CKC ENTRY FORM
Saskatoon Retriever Club

July 24, 25 & 26, 2021

Bradwell, SK

EVENT INFORMATION

FEES: Entry Fee \$ _____ TCN Fee \$ _____ Total Enclosed _____

TESTS ENTERED

July 24, 2021	July 25, 2021	July 26, 2021
___ Junior Hunt Test	___ Junior Hunt Test	___ Junior Hunt Test
___ Senior Hunt Test	___ Senior Hunt Test	___ Senior Hunt Test
___ Master Hunt Test	___ Master Hunt Test	___ Master Hunt Test
___ TCN Fees -	___ TCN Fees -	___ TCN Fees -

G INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male _____ Female _____

CKC Registration # _____ **NUMBER:** _____

CKC ERN # _____ TCN # _____

Date of Birth: ____/____/____ Place of Birth Canada _____ Elsewhere _____
Day Month Year

BREEDER(S) _____

SIRE _____

DAM _____

REG'D OWNER OR Lessee _____

OWNER'S ADDRESS or Lessee _____

Name of Handler _____
CREDIT CARD ENTRIES ONLY _____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____

CARD NO. _____ EXPIRY DATE ____/____/____

CARDHOLDER NAME (PLEASE PRINT) _____
I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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.

Signature of Owner or Agent _____ Telephone Number _____

E-mail address _____



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___ TCN Fees -	___ TCN Fees -	___ TCN Fees -

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male _____ Female _____

CKC Registration # _____ **NUMBER:** _____

CKC ERN # _____ TCN # _____

Date of Birth: ____/____/____ Place of Birth Canada _____ Elsewhere _____
Day Month Year

BREEDER(S) _____

SIRE _____

DAM _____

REG'D OWNER OR Lessee _____

OWNER'S ADDRESS or Lessee _____

Name of Handler _____
CREDIT CARD ENTRIES ONLY _____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____

CARD NO. _____ EXPIRY DATE ____/____/____

CARDHOLDER NAME (PLEASE PRINT) _____
I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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.

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