

OFFICIAL ENTRY FORM

(Pointing Field Trial)

Name of Club:		Calgary P	_				
Trial Date(s):		May 2	21 & 22, 2	<u>—</u>			
EVENT INFORMATION	ON						
FEES: Entry Fee\$		TCN	Fee	\$	Total	Enclosed	\$
STAKES ENTERED: Sun Mon Open Shooting D Amateur Shooting	g Dog	Sun Mon	Open De Open Pu	-			
DOG INFORMATION Registered Name of Dog:	N					Call Name:	
Breed:						Male	Female
☐ CKC Registration # ☐ CKC ERN #		CKC Miscellaneo	ous #	Insert I	Number Here:		
mm dd Date of Birth: Breeder:	I уу		Place	of Birth:	☐ Canada	☐ Elsew	here
Sire:			Dan	n:			
OWNER & AGENT INFORMA Registered Owner(s):	ATION						
Owner's Address:		Street Addre	266		City	Province	e Postal Code
Handler/Agent (if not Owner):					J.,		
Handler/Agent's Address:							
Are the Owner(s) and Handler	· Amateurs?	Street Addre		; 	City No □	Province	e Postal Code
I CERTIFY that I am the reginentered above and accept full agree to be bound by the rule the premium list.	responsibilit	y for all statements	made in this	s entry. In	consideration of	of the acceptance	of this entry, I (we)

I (we) further agree that the dog entered is and will be at this trial at my (our) own risk and that I (we) will hold the trial giving club, its members, agents and landowners free from liability for any claims arising out of the entry of the dog or its presence at the trial.

Telephone Number

Email

Signature of Owner or Agent



OFFICIAL ENTRY FORM

(Pointing Field Trial)

Name of Club:	Calgary Pointing Dog Club							
Trial Date(s):		May 21 & 22, 2023					_	
EVENT INFORMATION								
FEES: Entry Fee	\$		TCN Fee	_	\$	Total En	closed	\$
STAKES ENTERED:								
Sun Mon		Sun M						
☐ ☐ Open Shooting Dog				n Derby				
☐ ☐ Amateur Shooting D	og		☐ Ope	n Puppy				
DOG INFORMATION						_		
Registered Name of Dog:						Ca	all Name:	
Breed:							Male 🗆	Female
CKC Registration #		CKC Misce	llaneous #		Insert I	Number Here:		
CKC ERN #		TCN		Ĺ				
mm dd	уу							
Date of Birth:		_		Place of	Birth:	☐ Canada	☐ Elsew	here
Breeder:								
-								
Sire:				Dam:				
OWNER & AGENT INFORMATION	ON							
Registered Owner(s):								
Owner's Address:								
-		Street	Address			City	Province	Postal Co
Handler/Agent (if not Owner):								
Handler/Agent's Address:								
-		Street	Address			City	Province	e Postal Co
Are the Owner(s) and Handler Ar	mateurs?			Yes		No 🗆		
I CERTIFY that I am the register entered above and accept full res agree to be bound by the rules a the premium list.	sponsibilit	ty for all state	ments mad	le in this	entry. In	consideration of th	e acceptance	of this entry, I (
I (we) further agree that the dog members, agents and landowner								