
		Official Canadian Kennel Club Entry Form DARTMOUTH KENNEL CLUB Scent Detection Trial November 8, 2020		Administrative use only	
<input type="checkbox"/> Trial 1		Component: ___ x \$ 30.00 = _____ All 3 Components: \$ 75.00 = _____ TCN Fees: ___ x \$ 11.50 = _____ Instinct Test: ___ x \$ 25.00 = _____ Ex. Only: ___ x \$ 10.00 = _____ Catalogue: ___ x \$ 5.00 = _____ Total: _____			
Please Print or type CLEARLY (ONE DOG PER ENTRY)					
Enter in one only of the following classes CLASS <input type="checkbox"/> Instinct <input type="checkbox"/> Novice <input type="checkbox"/> Open					
COMPONENT <input type="checkbox"/> Container <input type="checkbox"/> Interior <input type="checkbox"/> Exterior		SIZE DIVISION <input type="checkbox"/> Small (less than 13 inches) <input type="checkbox"/> Medium (13 inches to less than 20 inches) <input type="checkbox"/> Large (20 inches and above)			
BREED		VARIETY		SEX	
NAME OF DOG Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC MSC # ___ CKC PEN # ___ CKC TCN # ___ CKC CCN #					
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		POSTAL CODE	
AGENT NAME					
AGENT ADDRESS					
CITY		PROV		POSTAL CODE	
Mail ID to: ___ OWNER or ___ AGENT					
*EMAIL					
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 Kennel Club 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, its members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.					
Signature of Agent or Owner				Phone Number	

		Official Canadian Kennel Club Entry Form DARTMOUTH KENNEL CLUB Scent Detection Trial November 8, 2020		Administrative use only	
<input type="checkbox"/> Trial 1		Component: ___ x \$ 30.00 = _____ All 3 Components: \$ 75.00 = _____ TCN Fees: ___ x \$ 11.50 = _____ Instinct Test: ___ x \$ 25.00 = _____ Ex. Only: ___ x \$ 10.00 = _____ Catalogue: ___ x \$ 5.00 = _____ Total: _____			
Please Print or type CLEARLY (ONE DOG PER ENTRY)					
Enter in one only of the following classes CLASS <input type="checkbox"/> Instinct <input type="checkbox"/> Novice <input type="checkbox"/> Open					
COMPONENT <input type="checkbox"/> Container <input type="checkbox"/> Interior <input type="checkbox"/> Exterior		SIZE DIVISION <input type="checkbox"/> Small (less than 13 inches) <input type="checkbox"/> Medium (13 inches to less than 20 inches) <input type="checkbox"/> Large (20 inches and above)			
BREED		VARIETY		SEX	
NAME OF DOG Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC MSC # ___ CKC PEN # ___ CKC TCN # ___ CKC CCN #					
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		POSTAL CODE	
AGENT NAME					
AGENT ADDRESS					
CITY		PROV		POSTAL CODE	
Mail ID to: ___ OWNER or ___ AGENT					
*EMAIL					
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 Kennel Club 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, its members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.					
Signature of Agent or Owner				Phone Number	