



# CANADIAN KENNEL CLUB

## OFFICIAL ENTRY FORM

### (Obedience)

Name of Club: Winnipeg Area Shetland Sheepdog Assoc.

Date(s) (Shows) Entered: October 20th, 2024

**EVENT INFORMATION**

FEES: Entry Fee \$ \_\_\_\_\_ Listing Fee \$ \_\_\_\_\_  
 Catalogue \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

**CLASSES ENTERED**

- |                                     |  |   |
|-------------------------------------|--|---|
| <input type="checkbox"/> Pre-Novice | <input type="checkbox"/> Novice Intermediate | <input type="checkbox"/> Exhibition Only          |
| <input type="checkbox"/> Novice A   | <input type="checkbox"/> Open HA             | <input type="checkbox"/> Unofficial Classes _____ |
| <input type="checkbox"/> Novice B   | <input type="checkbox"/> Open HB             | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Novice C   | <input type="checkbox"/> Open 18A            |   |
|                                     | <input type="checkbox"/> Open 18B            |   |
|                                     | <input type="checkbox"/> Utility A           |   |
|                                     | <input type="checkbox"/> Utility B           |   |

Jumps: \_\_\_\_\_ Height: \_\_\_\_\_ Width: \_\_\_\_\_

**DOG INFORMATION**

Registered Name of Dog: \_\_\_\_\_

Breed: \_\_\_\_\_ Male  Female

CKC Registration #  CKC Miscellaneous #   
 CKC ERN #  Listed  
 CKC PEN #  CKC CCN #

Date of Birth: \_\_\_\_\_ dd mm yy Place of Birth: Canada  Elsewhere

Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

**OWNER(S) & AGENT INFORMATION**

Registered Owner(s): \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Name of Agent/Handler: \_\_\_\_\_

Agent's Address: \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Mail To: Owner  Agent

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 \_\_\_\_\_ Email \_\_\_\_\_



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 \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_

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Name of Agent/Handler: \_\_\_\_\_

Agent's Address: \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

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