



OFFICIAL ENTRY FORM **CONFORMATION**

**Friday**

SHOW #1

SHOW #2

**Saturday**

SHOW #3

SHOW #4

**Sunday**

SHOW #5

SHOW #6

**PREPAID POWER \$30.00 (AT THE SHOW \$50.00)**

**CATALOGUE \$10:00**

I ENCLOSE \$ \_\_\_\_\_ FOR ENTRY FEES \_\_\_\_\_ FOR LISTING FEES \$ \_\_\_\_\_

*Please type or print clearly*

**Breed** \_\_\_\_\_ | **Variety** \_\_\_\_\_ | **Sex** \_\_\_\_\_

Enter in the following classes:

- Junior Puppy
- Senior Puppy
- 12-18 month
- Canadian Bred
- Bred by Exhibitor
- Open
- Specials Only
- Exhibition Only

SWEEPSTAKES:

- 6-9 Mos
- 9-12 Mos
- 12-18 Mos

Reg'd.

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

Check one – and – Enter Number here

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. No.
- CCN
- Listed

| Date of Birth

| D \_\_\_\_\_ M \_\_\_\_\_ Y \_\_\_\_\_

| Is this a puppy?

| Yes No

| Place of Birth

|  Canada  Elsewhere

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd. Owner(s) \_\_\_\_\_

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

City \_\_\_\_\_ | Prov. \_\_\_\_\_ | Postal Code \_\_\_\_\_

Name of Owner's Agent (if any) at the show \_\_\_\_\_

Agent's Address \_\_\_\_\_

City \_\_\_\_\_ | Prov. \_\_\_\_\_ | Postal Code \_\_\_\_\_

ID's will NOT be mailed – please provide email address below for entry confirmation.

DOGSHOW.CA TOLL-FREE FAX ENTRIES: 1-877-993-6879

Visa  Master Card  American Express

Card # \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_ Expiry Date / \_\_\_\_\_

I CERTIFY that I am the registered owner(s) of the 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.

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

E-Mail \_\_\_\_\_ (Please print clearly)



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Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd. Owner(s) \_\_\_\_\_

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

City \_\_\_\_\_ | Prov. \_\_\_\_\_ | Postal Code \_\_\_\_\_

Name of Owner's Agent (if any) at the show \_\_\_\_\_

Agent's Address \_\_\_\_\_

City \_\_\_\_\_ | Prov. \_\_\_\_\_ | Postal Code \_\_\_\_\_

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