

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM
FORBIDDEN PLATEAU OBEDIENCE AND TRACKING CLUB

Tracking Test: March 16, 2024
 Limited Entries: 12 TD



ENTRY FEES: TD: \$85.00 TDX \$100.00
Temporary Competition FEE: \$10.50

Mail or Deliver entries to:
Carly Trobridge
 5443 Jeevans Road, Nanaimo BC V9T 0E8
 Make cheques payable to: **F.P.O.T.C.**
 Email entries: cdtrobridge@gmail.com
 Send E-Transfer to: fpotcpayment@gmail.com

ENTRIES WILL NOT BE ACCEPTED UNLESS E-TRANSFER IS CONFIRMED

CLOSING DATE: March 6th @ 5:00pm

Fees: Entry Fee: \$_____ Listing Fee: \$_____ Total: \$_____		
Test Entered: TD [] TDX [] Worker Draw [] Check only ONE per entry form. Please indicate below if the dog is completing their Tracking Championship or Master TCH		
Registered Name of Dog: Call Name:		
Breed:	Variety:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Check One and Enter Number <input type="checkbox"/> CKC Registration # <input type="checkbox"/> CKC Miscellaneous # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC CCN # <input type="checkbox"/> CKCERN# <input type="checkbox"/> TCN # <input type="checkbox"/> Listed	Date of Birth: D_____M_____Y_____ Place of Birth: <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere Insert Number Here:	
Breeder(s):		
Sire:		
Dam:		
Reg. Owners:		

Owner's Address:
Owner's CKC Membership No:
Name of Agent (if any):
Agent's Address:
Mail to be sent to: <input type="checkbox"/> Owner or <input type="checkbox"/> Agent

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 responsible 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