

Office Use Only



Official Entry Form  
ALL-BREED LIMITED OBEDIENCE  
ALL-BREED LIMITED RALLY TRIALS



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Mt. Cheam Canine Association

ENTRIES CLOSE: WEDNESDAY, FEB 8th, 2017@ 9:00pm PST

OBEDIENCE: Fri (Feb 24) Tr 1 \_\_\_\_\_ Fri (Feb 24) Tr 2 \_\_\_\_\_ Sat (Feb 25) Tr 3 \_\_\_\_\_  
RALLY: Sat (Feb 25) Tr 1 \_\_\_\_\_ Sun (Feb 26) Tr 2 \_\_\_\_\_ Sun (Feb 26) Tr 3 \_\_\_\_\_

Cheques made payable to Mt. Cheam Canine Association  
Mail to Classic Show Services #109-30989 Westridge Place Abbotsford, B.C. V2T 0E7 (804)-845-9510  
Online and fax entry information at [www.dogshow.ca](http://www.dogshow.ca)

Entry Fee \$ \_\_\_\_\_ Listing Fee \$ \_\_\_\_\_  
Catalog \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Utility B	<input type="checkbox"/> Rally Novice A	<input type="checkbox"/> Rally Advanced B	Jump Height: 6" _____
<input type="checkbox"/> Novice A	<input type="checkbox"/> Open A	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Rally Novice B	<input type="checkbox"/> Rally Excellent A	8" _____
<input type="checkbox"/> Novice B	<input type="checkbox"/> Open B		<input type="checkbox"/> Rally Intermediate	<input type="checkbox"/> Rally Excellent B	12" _____
<input type="checkbox"/> Novice C	<input type="checkbox"/> Utility A	Jump Height: _____ Broad: _____	<input type="checkbox"/> Rally Advanced A		16" _____

**DOG INFORMATION** \*\*\*please print clearly\*\*\*

Breed \_\_\_\_\_ Variety \_\_\_\_\_  Male  Female

Reg'd Name of Dog \_\_\_\_\_

CKC Reg #  CKC Misc. #  CCN #  CKC ERN #  LISTED  Insert # Here \_\_\_\_\_

Date Of Birth \_\_\_\_\_ Place of Birth:  Canada  Elsewhere  Yes  No  
Puppy:  Yes  No

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

Sire \_\_\_\_\_

Dam \_\_\_\_\_

**OWNER/AGENT INFORMATION**

Reg'd Owner(s) \_\_\_\_\_ Membership # \_\_\_\_\_  
Agent \_\_\_\_\_

Owner's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

VISA  Mastercard  American Express A service charge of 10% will be assessed.

Credit Card # \_\_\_\_\_ Exp.Date \_\_\_\_\_ Name of Cardholder \_\_\_\_\_

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 the consideration of the acceptance of this entry, I 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/Agent \_\_\_\_\_ Ph.# ( ) \_\_\_\_\_  
Email Address (required) \_\_\_\_\_