


OFFICE USE	 <p>OFFICIAL CANADIAN KENNEL CLUB CONFORMATION ENTRY FORM September 5, 2015 CANADIAN CANE CORSO ASSOCIATION National Specialty</p>	OFFICE USE
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I enclose \$ _____ Entry Fees \$ _____ Listing Fees \$ _____
PLEASE TYPE OR PRINT CLEARLY

BREED CANE CORSO	VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
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ENTER IN THE FOLLOWING CLASSES:

<input type="checkbox"/> JUNIOR PUPPY	<input type="checkbox"/> BRED BY EXHIBITOR	<input type="checkbox"/> EXHIBITION ONLY (3-6 months)
<input type="checkbox"/> SENIOR PUPPY	<input type="checkbox"/> OPEN	<input type="checkbox"/> PREPAID CATALOGUE
<input type="checkbox"/> 12 - 18 MONTHS	<input type="checkbox"/> SPECIALS ONLY	
<input type="checkbox"/> CANADIAN BRED	<input type="checkbox"/> VETERANS CLASS	
	<input type="checkbox"/> EXHIBITION ONLY	

REG. NAME OF DOG

CHECK ONE -AND- ENTER NUMBER HERE	DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?
<input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED	____ / ____ / ____ Day Month Year	<input type="checkbox"/> YES <input type="checkbox"/> NO

NUMBER:	PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE
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BREEDER(S)

SIRE

DAM

REG'D OWNER(S)	CKC MEMBERSHIP NO.
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OWNER'S ADDRESS

CITY	PROV./STATE	POSTAL CODE
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NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW

AGENT'S ADDRESS

CITY	PROV./STATE	POSTAL CODE
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MAIL ID TO: OWNER AGENT

FAX ENTRIES ONLY VISA MASTERCARD

CARD NO. _____ **EXPIRY** ____/____

CARDHOLDER NAME (PLEASE PRINT) _____

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 _____

E-mail address: _____ **TELEPHONE NUMBER** _____