

 <p>Official Canadian Kennel Club Entry Form</p> <p>American Cocker Spaniel Club of Canada</p>	Administrative use only
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Entry fees: ___ x \$30.00 = _____

(Baby Puppy, Unofficial & Sweeps) Entry fees: ___ x \$15.00 = _____

Listing Fees: ___ x \$ 9.80 = _____

Ex. Only: ___ x \$10.00 = _____

Catalog: ___ x \$10.00 = _____

Total: _____

Please Print or type CLEARLY

Enter in one only of the following classes

CONFORMATION	SWEEPSTAKES	
<input type="checkbox"/> Baby Puppy	<input type="checkbox"/> Puppy	<input type="checkbox"/> Veteran
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> 6-9 months	<input type="checkbox"/> 7 up to 10 years
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> 9-12 months	<input type="checkbox"/> 10 years and older
<input type="checkbox"/> 12-18 Month	<input type="checkbox"/> Stud Dog	<input type="checkbox"/> 12-18 months
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Brood Bitch	
<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Stripped Down Class	<input type="checkbox"/> Altered <input type="checkbox"/> Exhibition Only

BREED	VARIETY	SEX
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NAME OF DOG

<p>Check one & enter Reg # here</p> <p>___ CKC Reg # _____</p> <p>___ CKC ERN # _____</p> <p>___ CKC MSC # _____</p> <p>___ Listed _____</p>	<p>Date Of Birth</p> <p>___ / ___ / ___</p> <p>Day Month Year</p>	<p>Is this a puppy?</p> <p>YES ___ NO ___</p>
<p>Place Of Birth ___ Canada ___ Elsewhere</p>		

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
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Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada and by any additional rules and regulations appearing in the premium list. Also, by signing this form I certify that I will not hold the Show giving Club, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____

Phone Number _____

Email: _____

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