



OFFICIAL ENTRY FORM CONFORMATION  
Calgary Kennel & Obedience Club

FRIDAY     SATURDAY     SUNDAY     MONDAY

I ENCLOSE \_\_\_\_\_ FOR ENTRY FEES \_\_\_\_\_ FOR LISTING FEES \_\_\_\_\_  
Please type or print clearly     Catalogue \$10.00

Breed	Variety	Sex
Enter in the following OFFICIAL events: UNOFFICIAL EVENT Sweepstakes		
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred by Exhibitor	<input type="checkbox"/> BABY Puppy
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> VETERAN
<input type="checkbox"/> 12-18 Month	<input type="checkbox"/> Specials Only	<input type="checkbox"/> BRACE
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only	
<input type="checkbox"/> Breeder/Owner/Handled (Friday Only)		<input type="checkbox"/> Veteran Sweeps 7-10rs
		<input type="checkbox"/> Veteran Sweeps 10+ yrs

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

Check One - and - Enter Number here | Date of Birth | Is this a Puppy?  
 CKC Reg. | D M Y | YES NO  
 CKC ERN No.  
 CKC Misc. Cert. No. | Place of Birth  
 TCN No. |  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 \_\_\_\_\_

**IDs will not be mailed – please supply email address below for entry confirmation**

Visa \_\_\_ Mastercard \_\_\_ Am Express \_\_\_  
 Card No. \_\_\_\_\_ Expiry \_\_\_\_/\_\_\_\_  
 Name of Card Holder: \_\_\_\_\_

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 NUMBER \_\_\_\_\_

E-mail \_\_\_\_\_ Please print clearly



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

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

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