



OFFICIAL ENTRY FORM – **RALLY OBEDIENCE**
Calgary Kennel & Obedience Club – May 2023

- FRI** (Trial #1) **SAT** (Trial #3) **SUN** (Trial #5)
 FRI (Trial #2) **SAT** (Trial #4) **SUN** (Trial #6) \$ **Catalogue 10.00**

I ENCLOSE _____ FOR ENTRY FEES _____ FOR TCN FEES _____

Please type or print clearly

Breed	Variety	Sex
Enter in the following Official Events:		
<input type="checkbox"/> Novice A	<input type="checkbox"/> Advanced B	<input type="checkbox"/> *Brace _____ (class)
<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent A	<input type="checkbox"/> *Team _____ (class)
<input type="checkbox"/> Intermediate	<input type="checkbox"/> Excellent B	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Advanced A	<input type="checkbox"/> Master	
JUMPS:		
		Height _____
		Width _____

PLEASE USE ONLY ONE FORM WHEN DOGS ARE ENTERED IN 2 CLASSES

Reg'd. Name _____
of Dog: _____

Check one - and - Enter Number here _____ |Date of Birth _____

CKC Reg. No. _____ |D _____ M _____ Y _____

CKC ERN No. _____

CKC Misc. Cert. No. _____ |Place of Birth _____

TCN CKC PEN No. CCN 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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