



OFFICIAL CKC ENTRY FORM

PRINCE EDWARD INTERPROVINCIAL SPRINGER CLUB

May 23, 24 & 25, 2025

Black Rock, Nova Scotia

EVENT INFORMATION

FEES: Entry Fee \$ _____ TCN # Fee \$ _____ Total Enclosed _____

STAKES ENTERED

Sat. May 23, 2025		Sun. May 24, 2025		Mon. May 25, 2025	
___ Open All-Age	\$160.00	___ Open All-Age	\$160.00	___ Open All-Age	\$160.00
___ Limit	- \$50.00	___ Puppy	\$50.00	___ Limit	- \$50.00
___ TCN # Fees	\$11.50	___ TCN # Fees	\$11.50	___ TCN # Fees	\$11.50

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male _____ Female _____

CKC Registration # _____ CKC Miscellaneous # _____

NUMBER:

CKC ERN # _____ TCN # _____

Date of Birth: ____/____/____ Place of Birth Canada _____ Elsewhere _____
Day Month Year

BREEDER(S)

SIRE

DAM

REG'D OWNER OR Lessee

OWNER'S ADDRESS or Lessee

Name of Handler

CREDIT CARD ENTRIES ONLY _____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____

CARD NO. _____ EXPIRY DATE ____/____/____

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 actual 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 address _____

PLEASE COMPLETE THIS FORM AND RETURN IT WITH YOUR ENTRY FORM AND PAYMENT IN FULL PRIOR TO THE CLOSING DATE **May 4th**.

NAME: _____

ADDRESS: _____

PROV./STATE: _____ PC/ZIP _____ TEL:(____) _____

e-mail: _____

Friday, May 23, 2025

Open All-Age #Dogs: _____ x \$160.00 CDN: _____

Limit #Dogs: _____ x \$50.00 CDN: _____

TCN # Fees: #Dogs: _____ x \$11.50 CDN: _____

Saturday, May 24, 2025

Open All-Age #Dogs: _____ x \$160.00 CDN: _____

Puppy #Dogs: _____ x \$50.00 CDN: _____

TCN # Fees: #Dogs: _____ x \$11.50 CDN: _____

Sunday, May 25, 2025

Open All-Age #Dogs: _____ x \$160.00 CDN: _____

Limit #Dogs: _____ x \$50.00 CDN: _____

TCN # Fees: #Dogs: _____ x \$11.50 CDN: _____

Patron List: \$10.00 CDN _____

TOTAL \$ _____

THANK YOU FOR YOUR SUPPORT

Please make cheques payable to the **PEI Springer Spaniel Club**

Signature: _____