


OFFICE USE		OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM RALLY OBEDIENCE	OFFICE USE
DUMBBELL OBEDIENCE CLUB			

Rally Obedience

-----Friday Trial 1 _____ Saturday Trial 3 _____ Sunday Trial 5

_____ Friday Trial 2 _____ Saturday Trial 4 _____ Sunday Trial 6

PLEASE TYPE OR PRINT CLEARLY

BREED	VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
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ENTER IN THE FOLLOWING CLASSES: **RALLY OBEDIENCE**

<input type="checkbox"/> NOVICE A (R.N.) <input type="checkbox"/> NOVICE B (R.N.) <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED "A" (R.A.) <input type="checkbox"/> ADVANCED "B" (R.A.) <input type="checkbox"/> EXCELLENT "A" (R.E.) <input type="checkbox"/> EXCELLENT "B" (R.E.)	<input type="checkbox"/> RALLY MASTER <input type="checkbox"/> BRACE(1,3,5) <input type="checkbox"/> TEAM(1,3,5)0 <input type="checkbox"/> EXH ONLY (RALLY) <input type="checkbox"/> EXH ONLY (3-6 Mo.) <input type="checkbox"/> JUMP HEIGHT	<input type="checkbox"/> Entry Fee <input type="checkbox"/> Listing Fee <input type="checkbox"/> Prepaid Catalogue <input type="checkbox"/> Total
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REG'D. NAME OF DOG

<p style="text-align:center;">CHECK ONE & ENTER NUMBER BELOW:</p> <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC CCN NO.	<p>DATE OF BIRTH</p> <p style="text-align:center;">____ / ____ / ____</p> <p style="text-align:center;">Day Month Year</p>	<p>ON SHOW DATE IS THIS A PUPPY?</p> <p style="text-align:center;">_____ YES _____ NO</p>
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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 #
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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 to Owner _____ or Agent _____

<u> VISA </u>	<u> MASTERCARD </u>	<u> AMERICAN EXPRESS </u>
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
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