OFFICE USE		OFFICIAL C/ OTTAW	ANADIAN K AVALL Obedi							
Make cheques payable to: <b>OVPC</b> Mail entries to: Donna LaHaise, P.O. Box 28, Richmond, ON K0A 2Z0			Regular Entry each dog per run         \$30.00           Day of Trial (no package rate) CASH				<ul> <li>Obedience Trial #37 (Sat)</li> <li>Obedience Trial #38 (Sat)</li> <li>Obedience Trial #39(Sun)</li> <li>Obedience Trial #40(Sun)</li> <li>PREPAID CATALOGUE</li> </ul>			
PLEASE TYPE	OR PRINT CLEARL	Y								
BREED					VARIET	Y	MALE	FEMALE		
ENTER IN THE	FOLLOWING CLAS	SES:								
OBEDIENCE         OPEN H-A           NOVICE A         OPEN H-B           NOVICE B         UTILITY A           NOVICE C         UTILITY B           NOVICE-INT.         EXHIBITION			OPEN 18-A OPEN 18-B				OBEDIENCE JUMP HEIGHT Height Width			
REG. NAME OF DOG										
CHECK ONE, E CKC REG	NTER NUMBER HE	RE	DATE OF BIRTH							
CKC KISC. CERT. NO. CKC ERN NO. LISTED			Day Month Year			ACE OF BIRTH CANADA ELSEWHERE				
BREEDER(S)										
SIRE										
DAM										
REG'D OWNER	(S) 1)				ско	Memb	ership #			
2)					ско	Momh	ership #			
-,					one	, merne	eromp #			
OWNER'S ADD	RESS									
CIT										
NAME OF OWN						PROV	/./STATE	POSTAL CODE		
(IF ANY) AT TH										
AGENT'S ADD	RESS									
CITY						PRO\	/./STATE	POSTAL CODE		
MAIL ID TO:		OWNE	R	AGENT						
	FIRMATION & SHO									
entered above a	I am the registered o and accept full resport bound by the rules a premium list	sibility for all stat	ements ma	de in this entry.	In conside	eration of	of the accept	ance of this entry, I		
SIGNATURE OF OWNER OR AGENT							TELEPHONE NUMBER			
E-MAIL ADDRE	SS:									

OFFICE USE		OFFICIAL CA								
Make cheques payable to: <b>OVPC</b> Mail entries to: Donna LaHaise, P.O. Box 28, Richmond, ON K0A 2Z0			Regular Entry each dog per run          Day of Trial (no package rate) CASH       Exhibition Only         Listing fee per class          Catalogue			35.00 12.00 11.30 □ Obedience Trial #37 (Sat) □ Obedience Trial #38 (Sat)				
PLEASE TYPE	OR PRINT CLEARL	Y								
BREED					VARIETY	,	MALE	FEMALE		
	FOLLOWING CLAS	SES:			VANLETT					
OBEDIENCE     OPEN H-A       NOVICE A     OPEN H-B       NOVICE B     UTILITY A       NOVICE C     UTILITY B       NOVICE-INT.     EXHIBITION			OPEN 18-A OPEN 18-A				OBEDIENCE JUMP HEIGHT Height Width			
REG. NAME OF DOG										
		RE		DATE OF I	BIRTH					
CKC REG. CKC MISC CKC ERN LISTED	. CERT. NO.		Day Month Year			PLACE OF BIRTH CANADA ELSEWHERE				
BREEDER(S)										
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SIRE										
DAM										
REG'D OWNER	(S) 1)				СК	C Membe	ership #			
2) CKC Membership #										
OWNER'S ADD	RESS									
CITY										
						PROV./STATE		POSTAL CODE		
NAME OF OWN (IF ANY) AT TH										
AGENT'S ADDR										
CITY						PROV./S	STATE	POSTAL CODE		
MAIL ID TO:		OWNER	R	AGENT	1	2 - 4				
SEND MY CON	FIRMATION & SHOW	SCHEDULE B	YE	MAILM	AIL (please	e check c	one, defau	It will be email)		
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 ADDRE	SS:									