OFFICE USE

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM



## Fraser Valley Dog Fanciers October 5, 6, 7 & 8 2018

OFFICE USE

I enclose \$ Entry	Fees \$	Listing Fees	\$	
Show 1/Show 2	Show 3	/Show 4		
	,	VARIETY	MALE FEMALE	
Senior Puppy 12-18 Months	Bred By Exhib	itor Pr	repaid Catalogue le Sweepstakes ans Sweepstakes	
REG. NAME OF DOG	DATE	OF BIRTH	ON SHOW DATE IS	
CHECK ONE – AND - ENTER NUMBER BELOW  CKC REG. NO.	DATE OF BIRTH		THIS A PUPPY?	
CKC MISC. CERT. NO. CKC ERN NO.  CKC PEN NO. LISTED	Month /	Day Year	YESNO	
NUMBER:		PLACE	OF BIRTH ELSEWHERE	
BREEDER(S)				
SIRE				
DAM				
REG'D OWNER(S)				
OWNER'S ADDRESS				
CITY NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW		PROV./STATE	POSTAL CODE	
AGENT'S ADDRESS				
CITY		PROV./STATE	POSTAL CODE	
IDs will not be mailed – please supp	oly email addres			
VISAMASTERCARD AMERICAN EXPRESS				
CARD NO.		EXP	IRY/	
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		Т	elephone number	
E-MAIL:				

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I enclose \$ E	ntry Fees \$	Listing Fees	s \$	
Show 1/Sho	w 2 Show	3/Show 4		
BREED		VARIETY	MALE FEMALE	
Junior Puppy Senior Puppy 12-18 Months Canadian Bred Bred By Exhibitor		lyJuveni	repaid Catalogue le Sweepstakes ins Sweepstakes	
REG. NAME OF DOG				
CHECK ONE – AND - ENTER NUMBER BELOW  CKC REG. NO. CKC MISC. CERT. NO. LISTED			ON SHOW DATE IS THIS A PUPPY?YESNO	
CKC PEN NO LISTED	Month	Day Year	OF BIRTH	
NUMBER:		CANADA		
BREEDER(S)				
SIRE				
DAM				
REG'D OWNER(S)				
OWNER'S ADDRESS				
CITY		PROV./STATE	POSTAL CODE	
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW				
AGENT'S ADDRESS				
CITY		PROV./STATE	POSTAL CODE	
IDs will not be mailed – please sup	oply email addr	ess below for entr	y confirmation	
VISA MASTERCARD	AMERICAN EXPR	RESS	<del>_</del>	
			IRY /	
CARD NO EXPIRY/_  CARDHOLDER NAME (PLEASE PRINT)				
I CERTIFY that I am the registered owner(s) of the have entered above and accept full responsibility for this entry, I (we) agree to be bound by the rules an and regulations appearing in the premium list.	all statements made i	n this entry. In considera	tion of the acceptance of	
SIGNATURE OF OWNER OR AGENT	<del></del> _	Т	elephone number	
E-MAIL:				