

Toy Dog Club of Alberta OFFICIAL CKC ENTRY FORM CONFORMATION



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		ust 8, 2015 Entry F	ees	
Conformation Junior Puppy Senior Puppy Can. Bred Bred BY	12-18 mo Open Special: Exhibitio	s Only	Baby Pupp Veterans	ру
	Pleas	e Print Clearly		
Breed:				Sex
Registered Name	of Dog			
7 				
Enter number CKC Reg. № CKC ERN № CKC Misc.	No.	Date of Birtl Is this a pup Place of Birt Canada		
☐ Listed				
Breeder(s)				
Sire				
Dam				
Reg'd Owners			***************************************	
Owners Address				
City			Province	PC
Name of Owner's Age	nt (if any) at the show			
Agent's Address				
City			Province	PC
I.D. will not be mailed	, please provide e-mail a	ddress		
Email (for schedule an	nd fax conformation)		***************************************	
Visa/MasterCard I	No			expiry/
Name of card hole	der- print	Signa	ature	
names I have entered a the acceptance of this e	e registered owner(s) of the and accept full responsibilit entry, I (we) agree to be bo nal rules appearing in the	y for all statements und by the rules an	made in this entry	. In consideration of
E-mail Address Telephone				



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		ıst 8, 2015					
	Listing Fees	Entry	Fees				
Conformation Junior Puppy Senior Puppy				Baby Puppy			
Can. Bred Bred BY	Specials Exhibition			Veterans			
		Print Clearly	_	V 010/G/10			
Breed:	ricase	Print Clearly		Sex			
	· .						
Registered Nam	e of Dog						
Enter number CKC Reg.		Date of Birth Is this a pupp	n D/ M_ oy Yes	/Y			
☐ CKC ERN		Place of Birt	h				
☐ CKC Misc ☐ Listed	. Cert. No.	Canada	Elsewh	nere			
Breeder(s)	***************************************	***************************************	***************************************				
Sire							
Dam		***************************************	***************************************				
Reg'd Owners							
Owners Address							
City			Province	PC			
Name of Owner's Ag	ent (if any) at the show						
Agent's Address							
City			Province	PC			
I.D. will not be maile	ed please provide e-mail add	Iress					
Email (for schedule a	and fax conformation)						
Visa/MasterCard	l No			_ expiry/			
	Name of card holder- printSignature						
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E-Mail Address Telep				•			