OFFICE USE OFFICIAL CKC ENTRY FORM OBEDIENCE & RALLY OBEDIENCE LETHBRIDGE & DISTRICT KENNEL CLUB		
RALLY OBEDIENCE	# 1 (Sat.)	
BREED ENTER IN THE FOLLOWING CLASSES: RALLY OBEDIENCE NOVICE A (R.N) NOVICE B (R.N)		
INTERMEDIATE (R.I.)	EXHIBIT	E INTERMEDIATE FION ONLY OBED. FION ONLY (3-6 Mo.) HEIGHT
REGISTERED NAME OF DOG DATE OF BIRTH ON SHOW DATE IS THIS		
CHECK ONE & ENTER NUMBER BELOW: CKC REG. NO. CKC MISC. CERT. NO. LISTED CKC PEN NO. CKC CN NO. Day Monti	A PUI	HOW DATE IS THIS PPY? YESNO DEBIRTH
NUMBER:CANADAELSEWHERE		
BREEDER(S)		
SIRE		
DAM		
REG'D OWNER(S) CKC MEMBERSHIP #		
OWNER'S ADDRESS		
СІТУ	PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW		
AGENT'S ADDRESS		_
IDs will not be mailed – please supply email address b	PROV./STATE	postal code
		EXPIRY
CARDINO.		
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:

OFFICE OFFICIAL CKC ENTRY FORM OBEDIENCE & RALLY OBEDIENCE OFFICE USE LETHBRIDGE & DISTRICT KENNEL CLUB # 1 _____(Sat.) #3 _____(Sun) # 2 ____(Sat.) #4 _____(Sun.) Entry Fee Listing Fee Prepaid Catalogue Total OBEDIENCE _(Sat.) #3 ____ _(Sat.) #4 ____ # 2 PLEASE TYPE OR PRINT CLEARLY MALE FEMALE BREED
ENTER IN THE FOLLOWING CLASSES: VARIETY R IN THE FOLLOWING CLASSES:

RALLY OBEDIENCE

NOVICE A (R.N)

NOVICE B (R.N)

INTERMEDIATE (R.L)

ADVANCED 'A' (R.A)

ADVANCED 'A' (R.A)

EXCELLENT 'A' (R.E)

EXCELLENT 'B' (R.E)

MASTERS (R.M)

PREP.

MASTERS (R.M) OBEDIENCE NOVICE A NOVICE B OPEN HA OPEN 18A OPEN HB OPEN 18B UTILITY A UTILITY B PRE-NOVICE
NOVICE C
NOVICE INTERMEDIATE
EXHIBITION ONLY OBED.
EXHIBITION ONLY (3-6 Mo.) EXHIBITION ONLY (RALLY)
EXHIBITION ONLY (3-6 Mo.) JUMP HEIGHT PREPAID CATALOGUE MASTERS (R.M.) JUMP HEIGHT REG. NAME OF DOG DATE OF BIRTH ON SHOW DATE IS THIS A PUPPY? | CHECK ONE & ENTER NUMBER BELOW:
| CKC REG. NO. | CKC ERN NO. |
| CKC MISC. CERT. NO. | LISTED |
| CKC PEN NO. | CKC CCN NO. _NO YES Month Day Year PLACE OF BIRTH

_CANADA _____ELSEWHERE NUMBER: BREEDER(S) SIRE DAM REG'D OWNER(S) CKC MEMBERSHIP # OWNER'S ADDRESS PROV./STATE POSTAL CODE CITY NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW AGENT'S ADDRESS CITY PROV./STATE POSTAL CODE IDs will not be mailed - please supply email address below for entry confirmation ___ MASTERCARD VISA AMERICAN EXPRESS EXPIRY CARDHOLDER NAME (PLEASE PRINT)

TELEPHONE NUMBER

SIGNATURE OF OWNER OR AGENT

E-MAIL:

TELEPHONE NUMBER