

Official Canadian Kennel Club Entry Form

Group 6 Specialty Club of BC Conformation Show: November 21, 2015



Show Secretary: Arcticdreams Show Services Phone:780-814-3665 Comp 56, Site 11, RR 2, Sexsmith AB. Fax: 1-877-993-6879 Entry Fees \$_____ Listing Fees \$_____ Catalogue \$____ P/F \$____ Total \$_____ BREED: _____ Sex ____ Enter in the following classes) [] Junior Puppy Male []Junior Puppy Female [] Veterans Male [] Senior Puppy Male [] Senior Puppy Female [] Veterans Female 12 to 18 mths Male 12 to 18 mths Female [] Exhibition Only Canadian Bred Male Canadian Bred Female [] Brace [] Bred by Exhibitor Male [] Bred by Exhibitor [] Open Male [] Open Female [] Specials Only Male [] Specials Only Female Reg. Name of Dog: Please Check one and enter number here_____ [] CKC Reg. No. [] CKC Misc. Cert No. [] CKC ERN No. [] CKC PEN No. Place of Birth: Canada [] Elsewhere [] [] LISTED (No CKC/ERN No.) Date of Birth: M_____ V____ Is this a puppy? Y____ N___ Sire:_____ Dam:_____ Reg. Owner: Address: City:_____ Prov:____ Postal Code:_____ Name of Owner's Agent:_____ Agent's Address:_____ City:______ Prov:_____ Postal Code:_____ I accept full responsibility for all statements made of this entry. I hereby certify that I understand the CKC rules and regulations, conditions and provisions in the Premium List for this show and agree to be bound by the same. [] Visa [] Mastercard [] AMEX Cardholder Name: (Print)_____ Card Number:_____ Expiry Date:_____ Cardholder Signature: Signature of Owner/Agent: _____

Phone:______ **EMAIL**:_____