

Official Canadian Kennel Club Entry Form

Administrative use only

## HALIFAX KENNEL CLUB Scent Detection Trial

July 13th, 2024

[ ] Trial 1	Component:	x \$25.00 =							
		onents: \$60.00 =							
	Instinct Test	x \$20.00 =							
	TCN Fees	x \$11.50 =							
	Exhibition or	nly x \$8.00 =							
	Catelog	x \$5.00 =							
Total:									
	ype CLEARLY (ONE DOG P	ER ENTRY)							
CLASS									
[ ] Instinct									
[ ] Novice [ ] OPEN	[ ] EXCELLENT	[ ] MASTER							
COMPONENT COMPONENT	COMPONENT	COMPONENT							
[ ] Container [ ] Container	[ ] Container	[ ] Container							
[ ] Interior [ ] Interior	[ ] Interior	[ ] Interior							
[ ] Exterior [ ] Exterior	[ ] Exterior	[ ] Exterior							
BREED	VARIET	Y SEX							
NAME OF DOG									
Check one & enter Reg # here	Date of Birth	Call Name							
CKC Reg #									
CKC ERN #									
CKC MSC #	Day Month	Year							
CKC PEN #									
CKC TCN #	Place of Birth _	Canada Elsewhere							
CKC CCN #									
BREEDER									
SIRE									
DAM									
REG. OWNER									
OWNER ADDRESS									
CITY	PROV PO	OSTAL CODE							
AGENT NAME									
AGENT ADDRESS									
MGENI ADDRESS									
CITY		STAL CODE							
Mail ID to:	_OWNER or AG	ENT							
*EMAIL									
I CERTIFY that I am the registered owner(s) of th above and accept full responsibility for all stateme be bound by the rules and regulations of the Ca premium list. Also, by signing this form I certify Agents liable in the event of any accident or misfor	ents made in this entry. In consideration of anadian Kennel Club and by any addition by that I will not hold the Show giving C	the acceptance of this entry, I(we) agree to an arral rules and regulations appearing in the							
Signature of Agent or Owner		Phone Number							



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## HALIFAX KENNEL CLUB Scent Detection Trial

July 14th, 2024

[ ]	Trial 2			۸ ۵			nponer		x \$25.0			
				Any C	om							
	Instinct Test x \$20.00 = TCN Fees x \$11.50 =											
							elog					
						Tota	0		_ ^			
CI A	Please Print or type CLEARLY (ONE DOG PER ENTRY)  CLASS											
_												
٠	] Instinct		LODEN			VOELLEN			LMACT			
	] Novice	[	] OPEN	[	-	XCELLEN	11	[	] MAST			
				COMPONENT			COMPONENT					
	Container	[	] Container	[	-	Container		[	] Contai			
	] Interior ] Exterior	[	] Interior ] Exterior	]	-	nterior Exterior		l	] Interior			
ι.	LXIGIIOI	L	] Exterior	ı	1 -	.xtenoi		ı	Lytelic	JI		
BRE	ED						VARIE	TY			SEX	
NAN	ME OF DOG											
	ck one & enter R	eg	# here			Date of B	Birth			Call	Name	
	CKC Reg #	_										
	CKC ERN #											
	CKC MSC #					Day Month Year						
	CKC PEN # CKC TCN #					Place of Birth Canada Elsewhere						
	CKC CCN #					Listaniere						
BRE	BREEDER											
SIR	SIRE											
DAN	DAM											
DEC OWNER												
REG. OWNER												
ow	NER ADDRESS											
CIT	CITY		PF	PROV		F	POSTAL CODE					
AGE	ENT NAME											
AGE	ENT ADDRESS											
CIT	Υ			PF	ROV	,	F	POSTA	AL CODE	į		
	Mail ID to: OWNER			R	or	or AGENT						
*EI	MAIL											
above be be prem	I CERTIFY that I am the registered owner(s) of this dog or that I am the authorized agent of the owner(s) whose name(s) I have entere 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. Also, by signing this form I certify that I will not hold the Show giving Club, its members, Directors, Employees of Agents liable in the event of any accident or misfortune however caused.											
s	ignature of Agent or Owner Phone Number											
_	Signature of Agent or Owner Phone Number											