OFFICE USE

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

OFFICE USE

THE SKAHA KENNEL CLUB

August 30 September 1,2 & 3

I enclose \$ Entry Fees \$ Listing Fees \$ 2 All Breed August 30, 2018_/_ Saturday Sept. 1,2018					
2 All Breed August 30, 20 Sunday Sept. 2, 2018					
Sweepstakes :Juvenile 6-9/9-1			/ 10+		
BREED:		VARIETY	MALE FEMALE		
Senior Puppy 12-18 Months	Bred By Exhibitor Prepaid Catalogue Open Specials Only Baby puppy Exhibition Only Brace				
REG. NAME OF DOG					
CHECK ONE – AND - ENTER NUMBER BELOW CKC REG. NO. CKC MISC. CERT. NO. CKC MISC. CERT. NO.	DATE /	ON SHOW DATE IS THIS A PUPPY? YES NO			
CKC PEN NO.	Month	Day Year	OF BIRTH		
NUMBER:		CANADA	ELSEWHERE		
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		1			
AGENT'S ADDRESS					
CITY		PROV./STATE	POSTAL CODE		
IDs will not be mailed – please supp	oly email addre	ess below for ent	try confirmation		
VISA MASTERCARD	AMERICAN EX	PRESS			
CARD NO.		EXF	PIRY/		
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		 ,	Telephone number		
E-MAIL:					

OFFICE USE



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

OFFICE USE

THE SKAHA KENNEL CLUB

August 30 September 1,2 & 3

I enclose \$ En	try Foos \$	Listing For	2 2 2
2 All Breed August 30, 201	l8 / Satu	rday Sept. 1.2018	-55 ψ
Sunday Sept. 2, 2018	/ Monda	y Sept 3,2018	
Sweepstakes :Juvenile 6-9/9-12	/12-18	Veteran 7-10_	/ 10+
BREED:		VARIETY	MALE FEMALE
Indian Danasa	Orientale Order		
	Specials Only Exhibition Only		paid Catalogue
Senior Puppy 12-18 Months	EXIIIDILIOII OIIIy		
	Baby puppy		
	Brace		
Open			
		_	_
REG. NAME OF DOG			
CHECK ONE – AND - ENTER NUMBER BELOW	DAT	TE OF BIRTH	ON SHOW DATE
			PUPPY?
CKC REG. NO. CKC ERN NO.	/_	/	YES NO
CKC PEN NO. LISTED	Month	Day Year	
NUMBER:		PLACE CANADA	OF BIRTH ELSEWHERE
NUMBER.		CANADA	LLGLWIILNL
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			1
CITY		PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT			
(IF ANY) AT THE SHOW			
AGENT'S ADDRESS			T
CITY		PROV./STATE	POSTAL CODE
IDs will not be mailed - please suppl	y email addro	ess below for entr	ry confirmation
VISAMASTERCARD	AMERICAN EXPR	:ESS	
CARD NO.		EXP	IRY/
CARDHOLDER NAME (PLEASE PRINT)			
I CERTIFY that I am the registered owner(s) of the dog have entered above and accept full responsibility for all s this entry, I (we) agree to be bound by the rules and re and regulations appearing in the premium list.	statements made in	n this entry. In considera	ation of the acceptance of
SIGNATURE OF OWNER OR AGENT		Т	elephone number
F-MAII:			

OFFICE USE

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

THE SKAHA KENNEL CLUB

OFFICE USE

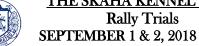
Obedience Trials SEPTEMBER 1 & 2, 2018

I enclose \$	Ent	try Fees \$		Listing Fe	es \$	
Saturday Sept. A SEPARATE ENTRY FORM M					IN 2 CLAS	SES
BREED	CST BE C	SED WHENT	VARIET			MALE FEMALE
☐ PreNovice ☐ Novice A ☐ Novice B	□ Open 18A □ Open 18B □ Utility A		JUMPS Height Width			
Novice CNovice IntermediateOpen HA	□ Uti	•			al 1 Saturda	у
□ Open HB				Pre	paid Catalog	ue
CHECK ONE - AND - ENTER NUMBER CKC REG. NO.	C ERN NO. N	DAT	E OF BIRT	TH / Year	ON SHOW THIS A PU	JPPY?
NUMBER:		MOTH	Day	PLACE	OF BIRTH	WHERE
BREEDER(S)						
DAM REG'D OWNER(S) OWNER'S ADDRESS						
CITY			PRO	OV./STATE	POSTAL CO	ODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW						
AGENT'S ADDRESS						
CITY				OV./STATE	POSTAL CO	
IDs will not be mailed – ple		oly email addı AMERICAN E		ow for ent	ry confirm	<u>ation</u>
		AMERICAN E.		EXP	IRY	/
CARDHOLDER NAME (PLEASE PRINT))					_
I CERTIFY that I am the registered owne have entered above and accept full respothis entry, I (we) agree to be bound by the and regulations appearing in the premium	nsibility for all ne rules and r	statements made	in this entry	. In considera	ation of the acc	eptance of
SIGNATURE OF OWNER OR AGE	NT			7	Telephone n	umber
E-MAIL:						

OFFICE USE

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

THE SKAHA KENNEL CLUB



OFFICE USE

I enclose \$	Entry Fees \$	Listing Fee	es \$	
Saturday Sent 1 20	M8 /Sunday Se	ant 2 2018		
Saturday Sept. 1,2018/Sunday Sept. 2,2018 A SEPARATE ENTRY FORM MUST BE USED WHEN A DOG IS ENTERED IN 2 CLASSES				
BREED		VARIETY	MALE FEMALE	
NOVICE A (R.N)	MASTERS		JUMPS	
NOVICE B (R.N.)		Height		
INTERMEDIATE (R.I.) ADVANCED "A" (R.A.	EXHIBITION ONLY (I	RALLY		
ADVANCED "B" (RA.)	EXHIBITION ONLY (3-	6 MO.)		
EXCELLENT "A" (R.E.) EXCELLENT "B"(R.E.)		Pro	paid Catalogue	
EXCLLLENT B (N.L.)			oald Catalogue	
DEC NAME OF DOC				
REG. NAME OF DOG		DATE OF BIRTH		
CHECK ONE – AND - ENTER NUMBER BEL			IS THIS A PUPPY?	
CKC REG. NO. CKC ERI	N NO/_	/	YESNO	
CKC PEN NO. LISTED	Month	Day Year	OF BIRTH	
NUMBER:		CANADA	ELSEWHERE	
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				
		DDOV (OTATE	DOCTAL CODE	
IDs will not be mailed – please	supply amail addr	PROV./STATE	POSTAL CODE	
			y commination	
VISA MASTERCARD	AMERICAN EXPR			
CARD NO.		EXP	IRY/	
CARDHOLDER NAME (PLEASE PRINT)				
I CERTIFY that I am the registered owner(s) of have entered above and accept full responsibilithis entry, I (we) agree to be bound by the rule and regulations appearing in the premium list.	ty for all statements made i	n this entry. In considera	ation of the acceptance of	
SIGNATURE OF OWNER OR AGENT		Т	Telephone number	
E-MAIL:				