



Office Use	Official Canadian Kennel Club Entry Form  <b>Rocky Mountain Whippet Association of Alberta</b>  Regional Specialty – July 14, 2017	Office Use	
Entry Fees	Listing Fees	Miscellaneous	Total
PLEASE TYPE OR PRINT CLEARLY			
<b>WHIPPET</b>		Variety	<input type="checkbox"/> Male <input type="checkbox"/> Female
ENTER IN THE FOLLOWING CLASSES			
<b>CONFORMATION</b> <input type="checkbox"/> JUNIOR PUPPY <input type="checkbox"/> SENIOR PUPPY <input type="checkbox"/> 12 - 18 MONTH <input type="checkbox"/> CANADIAN BRED <input type="checkbox"/> BRED BY EXHIBITOR <input type="checkbox"/> OPEN <input type="checkbox"/> VETERAN <input type="checkbox"/> SPECIALS ONLY		<input type="checkbox"/> STUD DOG & GET <input type="checkbox"/> BROOD BITCH & PROGENY <input type="checkbox"/> SEXUALLY ALTERED <input type="checkbox"/> BRACE <input type="checkbox"/> EXHIBITION <input type="checkbox"/> EXHIBITION (3 - 6 MONTH)	
		<b>SWEEPSTAKES</b> <b>JUVENILE</b> <input type="checkbox"/> 3 - 6 MONTHS <input type="checkbox"/> 6 - 9 MONTHS <input type="checkbox"/> 9 - 12 MONTHS <input type="checkbox"/> 12 - 18 MONTHS  <b>VETERAN</b> <input type="checkbox"/> 7 - 10 YEARS <input type="checkbox"/> 10+ YEARS	
		<input type="checkbox"/> PREPAID CATALOGUE	
<b>REGISTERED NAME OF DOG</b>			
<b>Check One</b> <input type="checkbox"/> CKC Registration # <input type="checkbox"/> CKC Miscellaneous # Number		<b>Date of Birth</b>  DD / MM / YY	<b>Place of Birth</b> <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere
		<b>Is this a Puppy?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Breeder(s)			
Sire			
Dam			
Registered Owner(s)			
Owner Address			
<i>City, Prov/State, Postal/Zip Code</i>			
Agent/Handler (if any)			
Agent/Handler Address			
<i>City, Prov/State, Postal/Zip Code</i>			
<b>ID's will not be mailed – Please supply email address below for entry confirmation</b>			
<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express			
Card Number		Expiry Date MM / YY	
Card Holder 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			
eMail		Telephone	