



OFFICIAL CANADIAN KENNEL CLUB FORM  
**CONFORMATION**

**WOODSTOCK & DISTRICT  
CANINE ASSOCIATION**

- Fri. February 23, 2018
- Sat. February 24, 2018
- Sun. February 25, 2018

**LIMITED BREED SHOWS**

- GROUP 1 - Fri. Feb. 23, 2018
- GROUP 3 - Fri. Feb. 23, 2018

**CLOSING DATE: 8:00 p.m.  
Monday, February 12, 2018  
or when the limit is reached.**

Make fees payable to  
**Woodstock & District  
Canine Association**  
and mail to:

MJN Show Services  
9 Samya Court  
Scarborough, ON M1R 2A4

*Please type or print clearly*

Entry Fees \$ \_\_\_\_\_  
(\$32.00 per show)  
Listing Fees \$ \_\_\_\_\_  
(\$11.30 per show)  
Baby Puppy class \$ \_\_\_\_\_  
(\$16.00 per show)  
Sweepstakes \$ \_\_\_\_\_  
(\$10.00 each)  
Exhibition Only \$ \_\_\_\_\_  
(\$10.00 )  
CATALOGUE \$ \_\_\_\_\_  
(\$5.00 each)  
TOTAL enclosed \$ \_\_\_\_\_

Breed _____	Variety _____	Sex _____
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Enter in the following Classes:

- |  |  |                                      |
|--|--|--------------------------------------|
| <input type="checkbox"/> Junior Puppy      | <input type="checkbox"/> Open            | <input type="checkbox"/> Sweepstakes |
| <input type="checkbox"/> Senior Puppy      | <input type="checkbox"/> Specials Only   | Class _____                          |
| <input type="checkbox"/> 12 - 18 Month     | <input type="checkbox"/> Baby Puppy      |                                      |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Exhibition Only |                                      |
| <input type="checkbox"/> Bred by Exhibitor |  |                                      |

Reg. Name of Dog \_\_\_\_\_

Check One – and – Enter Number here

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. Cert. No.
- Listed

Date of Birth

D \_\_\_\_\_ M \_\_\_\_\_ Y \_\_\_\_\_

Is this a puppy?

YES \_\_\_ NO \_\_\_

Place of Birth

- Canada
- Elsewhere

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner's Address \_\_\_\_\_

City \_\_\_\_\_

Prov. \_\_\_\_\_

Code \_\_\_\_\_

Name of Owner's Agent (if any)  
at the Show

Agent's Address \_\_\_\_\_

City \_\_\_\_\_

Prov. \_\_\_\_\_

Code \_\_\_\_\_

Mail I.D. to  Owner or  Agent Email \_\_\_\_\_

**FAX/CREDIT CARD ENTRIES**

Amer Express  Mastercard  VISA Card No. \_\_\_\_\_ Expiry \_\_\_\_\_

Name of Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.