OFFICIAL CANADIAN KENNEL CLUB FORM

CONFORMATION

		MARKHAM KENNEL CLUB ☐ Wed., August 23, 2017 (Show #1) ☐ Wed., August 23, 2017 (Show #2)								
			Thurs., August 24, 2017 (Show #3)							
CLOSING DATE: 8:00 p.m. Wednesday, August 9, 2017 (or when the limit is reached) Make fees payable to			Thurs., August 24, 2017			Show (#4) Entry Fees (\$30.00 per show Listing Fees (\$9.60 per show Exhibition Only (\$10.00)		per show)		\$ \$ \$ _
MARKHAM KENNEL CLUB and mail to: MJN Show Services 9 Samya Court Scarborough, ON M1R 2A4			Please type or print clearly			rly	Baby Puppy (\$20.00 per show) Catalogue (\$6.00 each) TOTAL enclosed			\$ \$ \$
Bree						Var	riety		Sex	
	r in the following Classes: Junior Puppy Senior Puppy 12 - 18 Month Canadian Bred Bred by Exhibitor Name of Dog	☐ Open ☐ Specials Only ☐ Baby Puppy ☐ Exhibition Only								
_				Date of Birth						
	ck One – and – Enter Numbe CKC Reg. No. CKC ERN No. CKC Misc. Cert. No. Listed der(s)	r nere	3				MY	Place of E	YES _	a puppy? NO Blsewhere
Sire										
Dam	1									
Reg	d Owner(s)									
Own	er's Address									
City				Prov	/.		Code			
at th	e of Owner's Agent (if any) e Show nt's Address									
City				Prov	/.		Code			
Mail	I.D. to Owner or Age	nt E	Email							

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 _

FAX/CREDIT CARD ENTRIES

Name of Cardholder _

☐ Amer Express ☐ Mastercard ☐ VISA Card No. __