



OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM CONFORMATION HUB CITY KENNEL & OBEDIENCE CLUB May 6 th to May 8 th , 2022	OFFICE USE						
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REG'D NAME OF DOG _____								
CHECK ONE & ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. NO. <input type="checkbox"/> TCN REG. NO.		DATE OF BIRTH ____ / ____ / ____ <small>Day Month Year</small>						
		ON SHOW DATE IS THIS A PUPPY? <input type="checkbox"/> YES <input type="checkbox"/> NO						
NUMBER _____	PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE							
BREEDER(S) _____								
SIRE _____								
DAM _____								
REG'D OWNER(S) _____		CKC MEMBERSHIP # _____						
OWNER'S ADDRESS _____								
CITY _____	PROV / STATE _____	POSTAL / ZIP CODE _____						
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW _____								
AGENT'S ADDRESS _____								
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<i>IDs will not be mailed – please supply email address below for entry confirmation</i>								
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS								
CARD NO. _____	EXPIRY ____ / ____							
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 _____								
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