
 Official Canadian Kennel Club Entry Form		Administrative use only
COBEQUID DOG CLUB		
<input type="checkbox"/> Trial 1 <input type="checkbox"/> Trial 2	Entry Fees ___ x \$30.00 = \$ ___ MOTCH ___ x \$50.00 = \$ ___ Wildcard ___ x \$15.00 = \$ ___ Exhibition Only ___ x \$10.00 = \$ ___ TCN Fee ___ x \$ 11.50 = \$ ___ Catalog ___ x \$ 5.00 = \$ ___ Total: \$ ___	
Use separate entry forms for Obedience and Rally		
Please Print or type CLEARLY		
Enter in one only of the following classes Novice A <input type="checkbox"/> Novice B <input type="checkbox"/> Novice C <input type="checkbox"/> Wildcard Novice ___ <input type="checkbox"/> Open A <input type="checkbox"/> Open B <input type="checkbox"/> Wildcard Open ___ <input type="checkbox"/> Utility A <input type="checkbox"/> Utility B <input type="checkbox"/> Wildcard Utility ___ <input type="checkbox"/> Pre Novice <input type="checkbox"/> Novice Int <input type="checkbox"/> Exhibition Only Jump Height ___		
BREED	VARIETY	SEX
NAME OF DOG		
Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC CCN# ___ CKC MSC # _____ ___ TCN # _____	Date of Birth ___ / ___ / ___ Day Month Year	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ Elsewhere
BREEDER		
SIRE		
DAM		
REG. OWNER		
OWNER ADDRESS		
CITY	PROV	POST CODE
AGENT NAME		
AGENT ADDRESS		
CITY	PROV	POST CODE

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COBEQUID DOG CLUB		
<input type="checkbox"/> Trial 1 <input type="checkbox"/> Trial 2	Entry Fees ___ x \$30.00 = \$ ___ RAE/RMX ___ x \$50.00 = \$ ___ Exhibition Only ___ x \$10.00 = \$ ___ TCN Fee ___ x \$ 11.50 = \$ ___ Catalog ___ x \$ 5.00 = \$ ___ Total: \$ ___	
Use separate entry forms for Obedience and Rally		
Please Print or type CLEARLY		
Enter in one only of the following classes <input type="checkbox"/> Novice A <input type="checkbox"/> Novice B <input type="checkbox"/> Advanced A <input type="checkbox"/> Advanced B <input type="checkbox"/> Excellent A <input type="checkbox"/> Excellent B <input type="checkbox"/> Master <input type="checkbox"/> Exhibition Only Rally Jump Height ___ <input type="checkbox"/> Team (Novice)		
BREED	VARIETY	SEX
NAME OF DOG		
Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC CCN# ___ CKC MSC # _____ ___ TCN # _____	Date of Birth ___ / ___ / ___ Day Month Year	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ Elsewhere
BREEDER		
SIRE		
DAM		
REG. OWNER		
OWNER ADDRESS		
CITY	PROV	POST CODE
AGENT NAME		
AGENT ADDRESS		
CITY	PROV	POST CODE
Email _____ Mail ID to: ___ OWNER or ___ AGENT		

Email _____ Mail ID to: ____ OWNER or ____AGENT	
I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.	
_____	_____
Signature of agent or owner	Phone Number

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.	
_____	_____
Signature of agent or owner	Phone Number

