



OFFICIAL CANADIAN KENNEL CLUB FORM
SPECIALTY CONFORMATION ENTRY FORM

CALEDON KENNEL ASSOCIATION

CLOSING DATE: 8 P.M. (EST) – WEDNESDAY, NOVEMBER 27, 2019

Make fees payable to **Caledon Kennel Association** and mail to:

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

Entry fee	\$32.00	_____
Listing fee	\$11.30	_____
Sweepstakes	\$15.00	_____
Frenchie Sweeps	\$22.00	_____
Altered	\$32.00	_____
Baby Puppy	\$15.00	_____
Non-Regular	\$10.00	_____
Unofficial	\$10.00	_____
Exhibition Only	\$10.00	_____
Catalogue (pre-order)	\$10.00	_____
TOTAL		_____

SATURDAY, DECEMBER 14, 2019

- | | |
|---|--|
| <input type="checkbox"/> GERMAN SHORTHAIRED POINTER CLUB OF CANADA | <input type="checkbox"/> FRENCH BULLDOG FANCIERS OF CANADA |
| <input type="checkbox"/> THE CANADIAN YORKSHIRE TERRIER ASSOCIATION INC. NATIONAL | <input type="checkbox"/> MINIATURE POODLE CLUB OF ONTARIO |
| <input type="checkbox"/> BULLDOG CLUB OF CANADA | |

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|--|--|---|---|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open (<i>Frenchies</i>) | NON-REG. CLASSES | SWEEPSTAKES |
| <input type="checkbox"/> Senior Puppy | Colour: _____ | <input type="checkbox"/> Baby Puppy | <input type="checkbox"/> Class: _____ |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Stud Dog | VETERANS SWEEPS |
| <input type="checkbox"/> 12-15 Months | <input type="checkbox"/> Veterans | <input type="checkbox"/> Brood Bitch | <input type="checkbox"/> Class: _____ |
| <input type="checkbox"/> 15-18 Months | Class: _____ | <input type="checkbox"/> Brace | <input type="checkbox"/> Catalogue |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Exhibition Only | |
| <input type="checkbox"/> Open | <input type="checkbox"/> Sexually Altered | UNOFFICIAL CLASSES | <i>Please consult individual specialties for classes offered.</i> |
| | | <input type="checkbox"/> Pointing Dog/Bitch (GSP) | |

Breed	Variety/Colour	Sex
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Reg. Name of Dog

Check One – and – Enter Number here	Date of Birth	Is this a puppy?
	<input type="checkbox"/> CKC Reg. No. _____	D _____ M _____ Y _____ YES ___ NO ___
	<input type="checkbox"/> CKC ERN No. _____	
	<input type="checkbox"/> CKC Misc. Cert. (MCN) No. _____	Place of Birth
<input type="checkbox"/> Listed (MCN BREEDS CANNOT ENTER AS LISTED)	<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Code
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Name of Owner's Agent (if any)

at the Show

Agent's Address

City	Prov.	Code
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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. I assume full responsibility for confirming receipt of all emailed entries with the Show Secretary.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.