



OFFICIAL CANADIAN KENNEL CLUB
ENTRY FORM
Alberta Lure Coursing Association
Friday, Saturday and Sunday August 13 – 15, 2021
Chase Ability Program (CAP)



I enclose \$ _____ Entry Fees \$ _____ Listing Fees \$ _____

PLEASE TYPE OR PRINT CLEARLY

BREED

MALE
 FEMALE

ENTER IN THE FOLLOWING EVENTS

Friday CAP Post Entry Fee _____

Saturday CAP 1 CAP 2 Post Entry Fee _____

300 yd – dogs 12 inches & under & brachycephalic breeds

Sunday CAP 1 CAP 2 Post Entry Fee _____

600 yd – all other dogs

Pizza Lunch (Sunday Only) _____

If there is a question on which course a dog shall run judge will decide.

REG. NAME OF DOG

CALL NAME

CHECK ONE –AND- ENTER NUMBER HERE

DATE OF BIRTH

CKC REG. NO.

CKC ERN NO

CKC MISC. CERT. NO.

CKC CCN NO..

CKC PEN NO.

TCN

_____/_____/_____

Day Month Year

NUMBER:

PLACE OF BIRTH

CANADA ELSEWHERE

BREEDER(S)

SIRE

DAM

REG'D OWNER(S)

OWNER'S ADDRESS

CITY

PROV./STATE

POSTAL CODE

**NAME OF OWNER'S AGENT
(IF ANY) AT THE SHOW**

AGENT'S ADDRESS

CITY

PROV./STATE

POSTAL CODE

IDs will not be mailed – please supply email address below for entry confirmation

VISA MASTERCARD 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 _____

Email

Telephone Number