
		Official Canadian Kennel Club Entry Form <b>MARITIME GROUP 7 CLUB</b> September 26, 2021 Juvenile & Veteran Sweepstakes		Administrative use only
<input type="checkbox"/> Sweepstakes September 26, 2021		Entry fees: _____ x 15.00 = _____		
		TOTAL _____		
Cheques to Maritime Group 7 Club				
Please Print or type CLEARLY				
<b>Enter in one only of the following classes</b>				
<b>Juvenile:</b>		<b>Veteran:</b>		
<input type="checkbox"/> Jr Puppy 6-9 months		<input type="checkbox"/> 7 and up to 9 years		
<input type="checkbox"/> Sr Puppy 9-12 Months		<input type="checkbox"/> 9 and up to 12 years		
<input type="checkbox"/> 12-18 months		<input type="checkbox"/> 12 years and older		
<b>BREED</b>		<b>VARIETY</b>		<b>SEX</b>
<b>NAME OF DOG</b>				
<b>Check one &amp; enter Reg # here</b>		<b>Date Of Birth</b>		<b>Is this a puppy?</b>
<input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> TCN # <input type="checkbox"/> CCN #		_____ / _____ / _____ Day Month Year		YES ___ NO ___
		Place Of Birth ___ Canada ___ Elsewhere		
<b>BREEDER</b>				
<b>SIRE</b>				
<b>DAM</b>				
<b>REG. OWNER</b>				
<b>OWNER ADDRESS</b>				
<b>CITY</b>		<b>PROV</b>	<b>POST CODE</b>	
<b>AGENT NAME</b>				
<b>AGENT ADDRESS</b>				
<b>CITY</b>		<b>PROV</b>	<b>POST CODE</b>	
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 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, 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 _____	
Email address _____				

		Official Canadian Kennel Club Entry Form <b>MARITIME GOLDEN RETRIEVER CLUB</b> September 25, 2021 Juvenile & Veteran Sweepstakes		Administrative use only
<input type="checkbox"/> Sweepstakes Sept 25, 2021		Entry fees: _____ x \$30.00 = _____		
		TOTAL: _____		
Cheques to: Maritime Golden Retriever Club				
Please Print or type CLEARLY				
<b>Enter in one only of the following classes</b>				
<b>Juvenile:</b>		<b>Veteran:</b>		
<input type="checkbox"/> 4-6 months		<input type="checkbox"/> 7-under 9 years		
<input type="checkbox"/> 16-9 months		<input type="checkbox"/> 9 years and over		
<input type="checkbox"/> 9-12 months				
<input type="checkbox"/> 12-18 months				
<b>BREED</b>		<b>VARIETY</b>		<b>SEX</b>
<b>NAME OF DOG</b>				
<b>Check one &amp; enter Reg # here</b>		<b>Date Of Birth</b>		<b>Is this a puppy?</b>
<input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> TCN # <input type="checkbox"/> CCN #		_____ / _____ / _____ Day Month Year		YES ___ NO ___
		Place Of Birth ___ Canada ___ Elsewhere		
<b>BREEDER</b>				
<b>SIRE</b>				
<b>DAM</b>				
<b>REG. OWNER</b>				
<b>OWNER ADDRESS</b>				
<b>CITY</b>		<b>PROV</b>	<b>POST CODE</b>	
<b>AGENT NAME</b>				
<b>AGENT ADDRESS</b>				
<b>CITY</b>		<b>PROV</b>	<b>POST CODE</b>	
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 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, 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 _____	
Email address _____				