



OFFICIAL CANADIAN KENNEL CLUB FORM

**SCENT DETECTION SANCTION MATCH**

**LONDON CANINE ASSOCIATION INC.**

**Saturday, July 13, 2019**

**CLOSING DATE: 8 p.m.  
Monday July 1, 2019  
Make fees payable to  
London Canine Association Inc.  
and mail to:  
Jackie Walker  
19 Woodland Drive  
Komoka, ON N0L 1R0**

ENTRY FEES \$ \_\_\_\_\_  
(Single Component \$7.00)

ENTRY FEES \$ \_\_\_\_\_  
(3 Components \$18.00)

DAY OF ENTRY \$ \_\_\_\_\_  
(Single Component \$9.00)

DAY OF ENTRY \$ \_\_\_\_\_  
(3 Components \$22.00)

*Please type or print clearly*

TOTAL enclosed \$ \_\_\_\_\_

Breed	Sex
Enter in the following Classes:	
<b>CLASS INSTINCT:</b> <input type="checkbox"/> Novice <input type="checkbox"/> Open <input type="checkbox"/> Excellent <input type="checkbox"/> Master  <b>COMPONENT:</b> <input type="checkbox"/> Container <input type="checkbox"/> Interior <input type="checkbox"/> Exterior	<b>DIVISION</b> <input type="checkbox"/> Small (Less than 13" <input type="checkbox"/> Medium (13" to less than 20") <input type="checkbox"/> Large (20" and above)

Reg. Name of Dog \_\_\_\_\_

Check One – and – Enter Number here <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> CKC PEN No. <input type="checkbox"/> TCN <input type="checkbox"/> CCN	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner's Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Code \_\_\_\_\_

Name of Owner's Agent (if any) at the Show \_\_\_\_\_

Agent's Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Code \_\_\_\_\_

<b>FAX/CREDIT CARD ENTRIES</b>	
Mail I.D. to <input type="checkbox"/> Owner or <input type="checkbox"/> Agent	Email _____
<input type="checkbox"/> Amer Express <input type="checkbox"/> Mastercard <input type="checkbox"/> 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.

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_