



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

Conformation Show: **BTCC Regional Specialty**

Show Secretary: Arcticdreams Show Services Phone:780-814-3665

Comp 56 Site 11RR 2 Sexsmith Alberta Fax: 1-877-993-6879

Entry Fees \$_____ Listing Fees \$_____ Catalogue \$_____ P/F \$_____ Total \$_____

Breed: Boston Terrier Sex _____ Size _____

Enter in the following classes)

- | | | |
|--|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open Under 15 lbs | <input type="checkbox"/> Brace |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Open 15 lbs-20 lbs | |
| <input type="checkbox"/> 12 to 18 mths | <input type="checkbox"/> Open 20 lbs-25 lbs | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Veterans | |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Stud Dog and Get | |
| | <input type="checkbox"/> Bitch and Progeny | SWEEPSTAKES CLASSES |
| <input type="checkbox"/> Specials Only | <input type="checkbox"/> Baby Puppy | (must be entered in a regular class or exhibition only), |
| | | __ 6 to 9 mos/ __ 9 to 12 mos/ __ 12 to 18 mos |

Reg. Name of Dog _____

Please Check one and enter number here _____

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. Cert No.
- CKC PEN No.

LISTED (No CKC/ERN No.)

Date of Birth M ___ D ___ Y ___ Is this a puppy? Y ___ N ___ Place of Birth Canada Elsewhere

Breeder: _____

Sire: _____

Dam: _____

Reg. Owner: _____

Owner's

Address: _____

City: _____ Prov: _____ Postal Code: _____

Name of Owner's Agent: _____

Agent's Address: _____

City: _____ Prov: _____ Postal Code: _____

Mail to: Owner Agent

I accept full responsibility for all statements made of this entry. I hereby certify that I understand the CKC rules and regulations, conditions and provisions in the Premium List for this show and agree to be bound by the same.

Visa MasterCard Amex

Card Number: _____

Expiry Date: ____/____/____

Cardholder Name: (Print) _____

Cardholder Signature: _____

Signature of Owner/Agent: _____

Phone: _____ Email: _____