



OFFICIAL CANADIAN KENNEL CLUB FORM  
**Southwestern Ontario Sporting Dog Club Inc.**  
**GROUP 1 SPECIALTY SHOWS**

- Sat. May 9, 2020 (Show #1)**  
 **Sun. May 10, 2020 (Show #2)**

CLOSING DATE: 8:00 P.M.  
 WEDNESDAY, APRIL 22, 2020  
 Forest City Kennel Club  
 and mail to:  
 MJN Show Services  
 9 Samya Court  
 Scarborough, ON M1R 2A4

Entry Fees (\$30.00 per show) \$ \_\_\_\_\_  
 Listing Fees (\$11.30 per show) \$ \_\_\_\_\_  
 Baby Puppy (\$12.00 per show) \$ \_\_\_\_\_  
 Exhibition Only (\$10.00) \$ \_\_\_\_\_  
 Sweepstakes (Saturday \$10.00) \$ \_\_\_\_\_  
 Catalogue (\$8.00 each) \$ \_\_\_\_\_  
 TOTAL enclosed \$ \_\_\_\_\_

*Please type or print clearly*

|       |         |     |
|-------|---------|-----|
| Breed | Variety | Sex |
|-------|---------|-----|

Enter in the following Classes:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Junior Puppy      | <input type="checkbox"/> Open            | <i>Saturday only</i>                         |
| <input type="checkbox"/> Senior Puppy      | <input type="checkbox"/> Veterans        | <input type="checkbox"/> Sweepstakes         |
| <input type="checkbox"/> 12 - 18 Month     | <input type="checkbox"/> Specials Only   | Class _____                                  |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Baby Puppy      | <input type="checkbox"/> Veteran Sweepstakes |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | Class _____                                  |

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. No. |                         | Place of Birth   |
| <input type="checkbox"/> TCN No. (Listed)    |                         | <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 |
|------|-------|------|

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.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.