



Official Kennel Club Entry Form
Wascana Dog Obedience Club Inc.
 ALL BREED, MIXED BREED AND UNRECOGNIZED BREED
 OBEDIENCE ENTRY FORM



Make cheques payable to Wascana Dog Obedience Club Inc

Saturday, March 27, 2021 Trial # 1
 Saturday, March 27, 2021 Trial #2

Sunday, March 28, 2021 Trial #3
 Sunday, March 28, 2021 Trial #4

Entries Close: March 12, 2021 8:00 pm CST or when limit is reached

Entry Fees - \$ 27.00 per trial or Same dog entered in any 4 classes \$ 100.00

Exhibition Only per trial- \$ 8.00 TCN Fees - \$ 10.50 per trial

Entry Fee \$	TCN Fee \$	Total \$
Total \$		

BREED:	VARIETY:	SEX Male <input type="checkbox"/> Female <input type="checkbox"/>
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JUMPS :Height _____ Width _____

<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Novice Intermediate	<input type="checkbox"/> Open HB
<input type="checkbox"/> Novice A	<input type="checkbox"/> Open 18 A	<input type="checkbox"/> Utility A
<input type="checkbox"/> Novice B	<input type="checkbox"/> Open HA	<input type="checkbox"/> Utility B
<input type="checkbox"/> Novice C	<input type="checkbox"/> Open 18 B	<input type="checkbox"/> EXHIBITION ONLY

Registered Name: _____

Check one ONLY

CKC Reg # CKC CCN # Enter Number _____
 CKC ERN # TCN Reg # _____
 CKC Misc Cert #
 CKC PEN # Place of Birth _____

Date of Birth _____
 _____ / _____ / _____
 day month year
 Canada Elsewhere

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 are entered above and I accept full

Breeder/s _____

Sire _____

Dam _____

Reg Owner/s _____ CKC Membership # _____

Owner's Address _____

City _____ Prov. _____ Postal Code _____

Agent's Name (if any) _____

Agent's Address _____

City _____ Prov. _____ Postal Code _____

IDs will NOT be mailed. Please supply email address below for entry confirmation

MAIL OR DROP OFF ENTRIES AT: 2270 Princess Street, Regina, SK S4T 3Z8

For ONLINE Entries VISA/MASTER CARD/AMERICAN EXPRESS INFORMATION
 VISA MASTER CARD AMERICAN EXPRESS

CARD # _____ Expiry Date _____ / _____
 _____ Month _____ Year

Name of Card Holder _____

Signature _____ Phone # _____

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 are entered above and I 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 CKC and by any additional rules and regulations in the premium list.

Email: _____

PLEASE PRINT YOUR EMAIL CLEARLY SO THAT WE CAN EMAIL YOUR CONFORMATION OF ENTRY