

**FORT GARRY KENNEL CLUB INC.**



Fri. May 24, 2019 Show 1 \_\_\_\_\_ Show 2 \_\_\_\_\_

Sat. May 25, 2019 \_\_\_\_\_

Sun. May 26, 2019 \_\_\_\_\_

Entries close Monday May 6, 2019 at 9:00 p.m. CDT  
Entry Fees (per dog per show) \$30.00 Listing fee \$10.50 per dog per show  
Same dog entered all 4 conformation shows \$100.00 Baby Puppy \$15.00  
Ex only \$10.00 Pre-ordered catalogue \$6.00

I enclose \$ \_\_\_\_\_ entry fees \$ \_\_\_\_\_ listing fees\$ \_\_\_\_\_ catalogue TOTAL \_\_\_\_\_

Breed	Variety	Sex
CIRCLE CLASS ENTERED	Baby Puppy (Sat. only) _____	Other _____
Junior Puppy	Bred by Exhibitor _____	_____
Senior Puppy	Open _____	_____
12-18 Month	Specials Only _____	_____
Canadian Bred	Exhibition Only _____	_____

**Reg. Name of Dog**

Check One and Enter Number here

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

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 \_\_\_\_\_ EMAIL: \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

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

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

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

Mail I.D. to  Owner or  Agent **EMAIL** \_\_\_\_\_

**FAX ENTRIES ONLY**

Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Card No. \_\_\_\_\_ Expiry \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

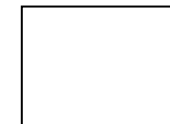
Name of Card Holder \_\_\_\_\_

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent for 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.

Signature of Owner or Agent \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Include a legible email address above for entry confirmation**

**FORT GARRY KENNEL CLUB INC.**



Fri. May 24/19 Obed #1 \_\_\_\_\_

Sat. May 25/19 Obed #2 \_\_\_\_\_

Sun. May 26/19 Obed #3 \_\_\_\_\_

Fri. May 24 Rally #1 \_\_\_\_\_

Sat. May 25 Rally #2 \_\_\_\_\_

Sun. May 26 Rally #3 \_\_\_\_\_

Entry Fees: Per dog per trial \$30.00 listing fees \$10.50 per dog per trial

I enclose \$ \_\_\_\_\_ entry fees \$ \_\_\_\_\_ listing fees\$ \_\_\_\_\_ catalogue Total \_\_\_\_\_

Please type or print clearly

Breed	Variety	Sex
CIRCLE OBED CLASSES	CIRCLE RALLY CLASS/ES	
Pre Novice	Nov. Intermediate	Novice A
Novice A	Open H A	Open 18 A
Novice B	Open H B	Open 18 B
Novice C	Utility A	Utility B
	Advanced A	Master
	Advanced B	Excellent A
	Rally Intermed.	Excellent B

Jumps: Obed	Rally
Height _____	_____
Width _____	_____

**Reg. Name of Dog**

Check One and Enter Number here

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

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 \_\_\_\_\_ EMAIL: \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ Postal Code \_\_\_\_\_

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

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

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

Mail I.D. to  Owner or  Agent **EMAIL** \_\_\_\_\_

**FAX ENTRIES ONLY**

Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Card No. \_\_\_\_\_ Expiry \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name of Card Holder \_\_\_\_\_

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