



OFFICIAL CANADIAN KENNEL CLUB FORM  
SPECIALTY CONFORMATION ENTRY FORM

**ELORA GORGE KENNEL CLUB**

**CLOSING DATE: 8 P.M. (ET) – WEDNESDAY, DECEMBER 14, 2022**

Make fees payable to **Elora Gorge Kennel Club** and mail to:

MJN Show Services  
33 Devonglen Drive, Kitchener, ON N2E 1Z6

Entry fee	\$34.00	_____
Listing fee	\$11.30	_____
Baby Puppy	\$16.00	_____
Exhibition Only	\$16.00	_____
Catalogue	\$8.00	_____
TOTAL		_____

**TUESDAY, DECEMBER 27, 2022**

SOUTHWESTERN ONTARIO ALL  
RETRIEVER SOCIETY

**WEDNESDAY, DECEMBER 28, 2022**

BARBET FANCIERS ASSOCIATION OF ONTARIO  
 ONTARIO CHESAPEAKE CLUB

Enter in the following Classes:

- |                                       |  |  |                                    |
|---------------------------------------|--|--|------------------------------------|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open              | <input type="checkbox"/> Specials Only   | <input type="checkbox"/> Catalogue |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Canadian Bred     | <b>NON-REG. CLASSES</b>                  |                                    |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Baby Puppy      |                                    |
| <input type="checkbox"/> 12-15 Months | <input type="checkbox"/> Veterans          | <input type="checkbox"/> Exhibition Only |                                    |
| <input type="checkbox"/> 15-18 Months | Class: _____                               |  |                                    |

*Please consult individual specialties for classes offered.*

Breed	Variety/Colour	Sex
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Reg. Name of Dog

Check One: <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC MCN <input type="checkbox"/> CKC ERN <input type="checkbox"/> CKC TCN	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
	Enter Number Here: Breeder(s)	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere

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	
<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. I assume full responsibility for confirming receipt of all emailed entries with the Show Secretary.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.