



OFFICIAL CANADIAN KENNEL CLUB FORM

**RALLY OBEDIENCE
K-W KENNEL CLUB**

Monday, May 20, 2019

CLOSING DATE: 6:00 p.m.
Saturday, May 4, 2019
Make fees payable to
K-W KENNEL CLUB INC.
and mail to:
MJN Show Services
9 Samya Court
Scarborough, ON M1R 2A4

- Trial #1
- Trial #2
- Trial #3

ENTRY FEES
(\$30.00) \$ _____

LISTING FEES
(\$11.30) \$ _____

EXHIBITION ONLY
(\$15.00) \$ _____

PREPAID CATALOGUE
(\$6.00 each) \$ _____

TOTAL enclosed \$ _____

Please type or print clearly

Breed _____	Sex _____
Enter in the following Classes: <input type="checkbox"/> Rally Novice A <input type="checkbox"/> Rally Excellent A <input type="checkbox"/> Rally Novice B <input type="checkbox"/> Rally Excellent B <input type="checkbox"/> Intermediate <input type="checkbox"/> Rally Masters <input type="checkbox"/> Rally Advanced A <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Rally Advanced B	Jump Heights (<i>Advanced/Excellent</i>) <input type="checkbox"/> Under 10" (6"/12") <input type="checkbox"/> 10" and under 15" (8"/16") <input type="checkbox"/> 15" and under 20" (12"/24") <input type="checkbox"/> 20" and over (16"/32")

Reg. Name of Dog _____

Check One – and – Enter Number here <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> CKC CCN No. <input type="checkbox"/> 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 _____

City _____	Prov. _____	Code _____
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Name of Owner's Agent (if any)
at the Trial _____

Agent's Address _____

City _____	Prov. _____	Code _____
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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.

SIGNATURE OF OWNER OR AGENT _____

TELEPHONE NO. _____