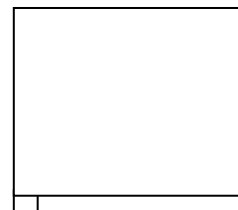


FORT GARRY KENNEL CLUB INC.



Sat.. May 20, 2017 SHOW 1 _____ SHOW 2 _____

Sun.. May 21, 2017 _____

L.R.C.M.. Sun. _____ Mon _____

Mon.. May 22, 2017 _____

(Labrador Specialty)

Entries close Monday May 1,, 2017 at 9:00 p.m. CDT
Entry Fees (per dog per show) \$28.00 Listing Fee \$9.00 Baby Puppy \$10.00
Ex only \$10.00 Pre-ordered catalogue \$6.00

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

Breed _____	Variety _____	Sex _____
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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	Is this a Puppy
D _____ M _____ Y _____	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