





OFFICE USE		OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM		OFFICE USE
Alberta Kennel Club Urban Tracking Test September 26 th , 2015				
ALL ENTRIES MUST BE SUBMITTED BY MAIL		NO FAX, COURIER OR EMAIL ENTRIES ACCEPTED		LIMITED ENTRIES
ENTRY FEES \$ _____		LISTING FEES \$ _____		TOTAL \$ _____
PLEASE TYPE OR PRINT CLEARLY				
BREED _____			___ MALE ___ FEMALE	
CLASS ENTERED (choose one):				
_____ UTD	_____ UTDX	Dog's Call Name _____		
REG. NAME OF DOG _____				
CHECK ONE AND ENTER NUMBER HERE		DATE OF BIRTH		
___ CKC REG. NO. ___ CKC MISC. CERT. NO.	___ CKC ERN NO. ___ LISTED	____/____/____ Day Month Year		
NUMBER: _____		PLACE OF BIRTH ___ CANADA ___ ELSEWHERE		
BREEDER(S) SIRE _____				
DAM _____				
REG'D OWNER(S) _____				
OWNER'S ADDRESS				
CITY _____		PROV./STATE _____	POSTAL CODE _____	
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW _____				
AGENT'S ADDRESS				
CITY _____		PROV./STATE _____	POSTAL CODE _____	
MAIL ID TO: _____		___ OWNER	___ AGENT	
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.				
SIGNATURE OF OWNER OR AGENT _____			TELEPHONE NUMBER _____	
E-MAIL ADDRESS: _____				

OFFICE USE		OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM		OFFICE USE
Alberta Kennel Club Urban Tracking Test September 26 th , 2015				
ALL ENTRIES MUST BE SUBMITTED BY MAIL		NO FAX, COURIER OR EMAIL ENTRIES ACCEPTED		LIMITED ENTRIES
ENTRY FEES \$ _____		LISTING FEES \$ _____		TOTAL \$ _____
PLEASE TYPE OR PRINT CLEARLY				
BREED _____			___ MALE ___ FEMALE	
CLASS ENTERED (choose one):				
_____ UTD	_____ UTDX	Dog's Call Name _____		
REG. NAME OF DOG _____				
CHECK ONE AND ENTER NUMBER HERE		DATE OF BIRTH		
___ CKC REG. NO. ___ CKC MISC. CERT. NO.	___ CKC ERN NO. ___ LISTED	____/____/____ Day Month Year		
NUMBER: _____		PLACE OF BIRTH ___ CANADA ___ ELSEWHERE		
BREEDER(S) SIRE _____				
DAM _____				
REG'D OWNER(S) _____				
OWNER'S ADDRESS				
CITY _____		PROV./STATE _____	POSTAL CODE _____	
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW _____				
AGENT'S ADDRESS				
CITY _____		PROV./STATE _____	POSTAL CODE _____	
MAIL ID TO: _____		___ OWNER	___ AGENT	
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.				
SIGNATURE OF OWNER OR AGENT _____			TELEPHONE NUMBER _____	
E-MAIL ADDRESS: _____				