



**OFFICIAL CANADIAN KENNEL CLUB FORM
SPECIALTY CONFORMATION ENTRY
BARRIE KENNEL AND OBEDIENCE CLUB**

- Northern Ontario Boxer Club - (Sat.)
- Dalmatian Club of Canada - National (Sat.)
- Greater Mid-Ontario Doberman Fanciers (Sun.)
- Kuvasz Club of Canada - (National) (Sun.)

CLOSING DATE: 8:00 p.m.

Thursday, July 18, 2019

**Make fees payable to
BARRIE KENNEL &
OBEDIENCE CLUB INC.
and mail to:**

**MJN Show Services
9 Samya Court
Scarborough, ON M1R 2A4**

Entry Fees (\$32.00 per show)	\$ _____
Listing Fees (\$11.30)	\$ _____
Exhibition Only (\$10.00)	\$ _____
Baby Puppy (\$14.00)	\$ _____
Non-Regular (\$14.00)	\$ _____
Altered (\$14.00)	\$ _____
Sweepstakes (\$14.00)	\$ _____
Catalogue (\$8.00 each)	\$ _____
TOTAL enclosed	\$ _____

Please type or print clearly

Breed _____	Variety _____	Sex _____
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Enter in the following Classes: *Consult individual specialties for classes offered*

<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Veterans	<input type="checkbox"/> Brace	<input type="checkbox"/> Sweepstakes
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Exhibition Only	Class _____
<input type="checkbox"/> 12 - 18 Month	<input type="checkbox"/> Altered Class	<input type="checkbox"/> Veteran Sweepstakes	Class _____
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Baby Puppy		
<input type="checkbox"/> Bred by Exhibitor	<input type="checkbox"/> Stud Dog		
<input type="checkbox"/> Open	<input type="checkbox"/> Brood Bitch		

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"/> 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 _____

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

City _____	Prov. _____	Code _____
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Mail I.D. to Owner or Agent Email _____

FAX/CREDIT CARD ENTRIES

Amer Express Mastercard 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. _____