



# OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

## CONFORMATION SHOW: ALBERTA BOXER CLUB

### OCTOBER 12, 2019

SHOW SECRETARY: ARCTICDREAMS SHOW SERVICES PHONE:780-814-3665

COMP 56 SITE 11RR 2 SEXSMITH ALBERTA FAX: 1-877-993-6879

ENTRY FEES \$ \_\_\_\_\_ LISTING FEES \$ \_\_\_\_\_ CATALOGUE \$ \_\_\_\_\_ P/F \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

BREED: \_\_\_\_\_ SEX \_\_\_\_\_

ENTER IN THE FOLLOWING CLASSES)

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> JUNIOR PUPPY      | <input type="checkbox"/> VETERANS      | <input type="checkbox"/> SPECIALS ONLY     | <input type="checkbox"/> EXHIBITION ONLY |
| <input type="checkbox"/> SENIOR PUPPY      | <input type="checkbox"/> BABY PUPPY    | <input type="checkbox"/> STUD DOG AND GET  | <input type="checkbox"/> JUVENILE SWEEPS |
| <input type="checkbox"/> 12 TO 15 MTHS     | <input type="checkbox"/> 15 TO 18 MTHS | <input type="checkbox"/> BITCH AND PROGENY | <input type="checkbox"/> VETERAN SWEEPS  |
| <input type="checkbox"/> BRED BY EXHIBITOR | <input type="checkbox"/> OPEN          |  |  |

REG. NAME OF DOG \_\_\_\_\_

PLEASE CHECK ONE AND ENTER NUMBER HERE \_\_\_\_\_

CKC REG. No.  CKC ERN No.  CKC Misc. CERT No.  CKC PEN No.  LISTED (No CKC/ERN No.)

DATE OF BIRTH M \_\_\_ D \_\_\_ Y \_\_\_ IS THIS A PUPPY? Y \_\_\_ N \_\_\_ PLACE OF BIRTH CANADA  ELSEWHERE

BREEDER: \_\_\_\_\_

SIRE: \_\_\_\_\_

DAM: \_\_\_\_\_

REG. OWNER: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

NAME OF OWNER'S AGENT: \_\_\_\_\_

AGENT'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

MAIL TO:  OWNER  AGENT

I ACCEPT FULL RESPONSIBILITY FOR ALL STATEMENTS MADE OF THIS ENTRY. I HEREBY CERTIFY THAT I UNDERSTAND THE CKC RULES AND REGULATIONS, CONDITIONS AND PROVISIONS IN THE PREMIUM LIST FOR THIS SHOW AND AGREE TO BE BOUND BY THE SAME.  VISA  MASTERCARD  AMEX

CARD NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

CARDHOLDER NAME: (PRINT) \_\_\_\_\_

CARDHOLDER SIGNATURE: \_\_\_\_\_

SIGNATURE OF OWNER/AGENT: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_