



**FORBIDDEN PLATEAU OBEDIENCE AND
TRACKING CLUB
ALL-BREED TRACKING TEST**
Sunday, March 19, 2017
Limited Entries - 4 T.D.'s and 4 T.D.X.'s

ENTRY FEES: T.D. \$65.00 T.D.X. \$80.00
CKC Listing Fee: \$8.93

Make cheques payable to: F.P.O. & T.C. and mail to:
Penny Jackson, Test Secretary, 2225 June Road Courtenay, B.C. V9J 1X9

ENTRIES CLOSE: 4:00 P.M. Friday, February 24, 2017

Entry fees \$ _____ Listing fees \$ _____ TOTAL \$ _____ Please type or print clearly.		
Test Entered	TD <input type="checkbox"/>	TDX <input type="checkbox"/>
Reg. Name of Dog		
Breed	Variety	Sex:
Check One - and - Enter Number here <input type="checkbox"/> CKC Reg. # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC Misc # <input type="checkbox"/> CKC CCN # <input type="checkbox"/> Listed	Date of Birth D ____ M ____ Y ____	
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	
Breeder(s)		
Sire		
Dam		
Reg'd Owner(s)		
Owner's CKC Membership #		
Owner's Address		
City	Prov.	Postal Code
Name of Owner's Agent (if any)		
Agent's Address		
City	Prov.	Postal Code
Mail I.D. to <input type="checkbox"/> Owner or <input type="checkbox"/> 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 NO. _____

EMAIL _____



**FORBIDDEN PLATEAU OBEDIENCE AND
TRACKING CLUB
ALL-BREED TRACKING TEST**
Sunday, March 19, 2017
Limited Entries - 4 T.D.'s and 4 T.D.X.'s

ENTRY FEES: T.D. \$65.00 T.D.X. \$80.00
CKC Listing Fee: \$8.93

Make cheques payable to: F.P.O. & T.C. and mail to:
Penny Jackson, Test Secretary, 2225 June Road Courtenay, B.C. V9J 1X9

ENTRIES CLOSE: 4:00 P.M. Friday, February 24, 2017

Entry fees \$ _____ Listing fees \$ _____ TOTAL \$ _____ Please type or print clearly.		
Test Entered	TD <input type="checkbox"/>	TDX <input type="checkbox"/>
Reg. Name of Dog		
Breed	Variety	Sex:
Check One - and - Enter Number here <input type="checkbox"/> CKC Reg. # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC Misc # <input type="checkbox"/> CKC CCN # <input type="checkbox"/> Listed	Date of Birth D ____ M ____ Y ____	
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	
Breeder(s)		
Sire		
Dam		
Reg'd Owner(s)		
Owner's CKC Membership #		
Owner's Address		
City	Prov.	Postal Code
Name of Owner's Agent (if any)		
Agent's Address		
City	Prov.	Postal Code
Mail I.D. to <input type="checkbox"/> Owner or <input type="checkbox"/> 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 NO. _____

EMAIL _____