

**C.K.C. Canine Good Neighbour Test**  
**Hosted By: Northern Lights Prairie Region GSD Club**  
**FRIDAY, JUNE 3**

“This CKC program identifies and rewards responsible and caring owners and their canine partners! The purpose of the CGN program test is to ensure that our dogs are accepted as valued members of the community and can be counted on to present good manners at home, in public places and in the presence of other dogs. The program was created to assist canine owners in combating anti-dog sentiment and to enhance community awareness of responsible dog ownership and the benefits associated with dog ownership.” (Taken from the Canine Good Neighbour Program Participant Handbook, available from the CKC by calling the order desk at 416-675-5511 or [www.ckc.ca](http://www.ckc.ca))

This test is not a competition calling for precision performance by the handler and dog. Rather, it assesses the handler and dog's relationship together with the handler's ability to control the dog. We recommend that you read the CGN Participant Handbook so that you will be familiar with what you and your dog will be required to do.

ENTRY FEES: \$30.00 per dog (this includes the \$10.00 CKC fee for CGN Certification)  
Entries at this pre-entry price of \$30.00 will close May 17, 2016. (If space available, some entries will be taken after this date or at the show for a fee of \$35.00 per dog.)

PLEASE NOTE: Dogs will be tested in order that their entries are received, however flexibility in scheduling will be made for those showing in the Friday Conformation, Obedience or Rally rings.

**\*\*PLEASE DO NOT MAIL THIS ENTRY FORM WITH YOUR  
SHOW/TRIAL ENTRIES – SEPARATE PAYMENT REQUIRED\*\***

**PRE-ENTRIES CLOSE: MAY 17, 2016**

Mail form below with entry fee payable to Northern Lights PR GSD Club  
c/o Maureen C. Charlton, 10436 – 136 Avenue NW  
Edmonton, Alberta T5E 1W3 (780-406-2666) [mcharlton@interbaun.com](mailto:mcharlton@interbaun.com)

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PC \_\_\_\_\_

NAME OF DOG: \_\_\_\_\_ CKC REG # \_\_\_\_\_

BREED: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

EMAIL: \_\_\_\_\_ ENTERED IN FRIDAY SHOW? \_\_\_\_\_

*If submitting more than one dog for testing, please photocopy this form or write  
information required on a separate piece of paper.*