

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM



Metro Valley Afghan Hound Association
Sunday September 4, 2016

Enter the Following Classes:

- | | | | | | |
|-------------------|--------------------------|-------------------------------------|--------------------------|-------------------------|--------------------------|
| Regular | | Non-Regular & Unofficial | | Sweepstakes | |
| Junior Puppy | <input type="checkbox"/> | Open | <input type="checkbox"/> | Sire & Get | <input type="checkbox"/> |
| Senior Puppy | <input type="checkbox"/> | Veteran | <input type="checkbox"/> | Dam & Progeny | <input type="checkbox"/> |
| 12 - 18 Months | <input type="checkbox"/> | Specials Only | <input type="checkbox"/> | Brace | <input type="checkbox"/> |
| Canadian Bred | <input type="checkbox"/> | Exhibition Only | <input type="checkbox"/> | Parade of Veterans | <input type="checkbox"/> |
| Bred By Exhibitor | <input type="checkbox"/> | Baby Puppy | <input type="checkbox"/> | Parade of Title Holders | <input type="checkbox"/> |
| | | | | 6 - 9 Months | <input type="checkbox"/> |
| | | | | 9 - 12 Months | <input type="checkbox"/> |
| | | | | 12 - 18 Months | <input type="checkbox"/> |
| | | | | Veteran 7 - 10 Yrs | <input type="checkbox"/> |
| | | | | Veteran 10 - 12 Yrs | <input type="checkbox"/> |
| | | | | Veteran over 12 Yrs | <input type="checkbox"/> |

Bred By Exhibitor in Specialty - Will this dog be eligible to compete for this award?
 (See the rules in the Premium List on page 5) Yes No

⇒ **ENTRIES CLOSE: 8:00 pm (PDT) – Friday August 12, 2016** ⇐

All fees payable to Metro Valley Afghan Hound Association and mailed to Show Secretary,
 On Line entry fees are handled by DogShows.ca

Entry Fees: _____ Listing Fees: _____ Catalogue: _____ Total Fees: _____

(Please refer to page ii of the over cover for entry fees)

Breed **Afghan Hound** Variety _____ Sex _____

Reg'd Name of Dog _____
 (CKC - RECOGNIZED TITLES ONLY)

- CHECK ONE AND ENTER NUMBER HERE** Date of Birth Is this a puppy?
- CKC Reg. No. Month ___ Day ___ Year ___ Yes No
- CKC ERN No.
- Listed (No CKC/ERN No.) Place of Birth
- CKC Misc. # Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Reg'd Owner(s) _____

Reg'd Owner(s) _____

Owners Address _____

City _____ Prov/State _____ Postal/Zip Code _____

Name of Owner's Agent (if any) _____

Agent's Address _____

Acknowledgements to be returned to (check one only) **Owner** or **Agent**

I accept full responsibility for all statements made on this entry. I hereby certify that I understand the CKC rules and regulations, conditions and provisions in the Premium List for this show and I agree to be bound by the same.

PAYMENT OF ENTRY FEES MAY BE CHARGED TO:

Visa Name of Cardholder _____

MasterCard Credit Card # _____

(Please Print)

Exp. Date ___/___/___ (Month/Year)

Signature of Cardholder _____

Signature of Owner or Agent _____ (_____) Telephone Number.

Email Address: _____