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OFFICIAL CKC ENTRY FORM Regina Retriever Club

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OFFICIAL CKC ENTRY FORM Regina Retriever Club

CORPORAL DE COMPONITOR DE COMP	August 23 & 24, 2025	Pilot Butte, SK	OR PORT	August 23 & 24, 2	2025 Pilo	t Butte, SK
EVENT INFORMATION			EVENT INFORMATION			
FEES: Entry Fee \$	TCN Fee \$	Total Enclosed	FEES: Entry Fee \$	TCN Fee \$	Total Enclosed _	
TESTS ENTERED			TESTS ENTERED			
August 23, 2025	Α	ugust 24, 2025	August 23, 2025		August 24, 2025	
WC \$40.00	_	WC \$40.00	WC \$40.00		WC \$40.00	
WCI \$45.00		WCI \$45.00	WCI \$45.00		WCI \$45.00	
WCX \$50.00	-	WCX \$50.00	WCX \$50.00		WCX \$50.00	
TCN Fees - \$11.5		TCN Fees - \$11.50	TCN Fees - \$11.50	n	TCN Fees - \$11.50	
DOG INFORMATION	<u></u>		DOG INFORMATION			
Registered Name of Dog:		Call Name:	Registered Name of Dog:		Cal	l Name:
Breed:		Male Female	Breed:		Male	Female
CKC Registration #	NUN	MBER:	CKC Registration #		NUMBER:	
CKC ERN # T	TCN #		CKC ERN # TO	CN #		
Date of Birth:	//	e of Birth Canada Elsewhere	Date of Birth:/	Month Year	Place of Birth Canada _	Elsewhere
BREEDER(S)			BREEDER(S)			
SIRE			SIRE			
DAM			DAM			
REG'D OWNER OR Lessee			REG'D OWNER OR Lessee			
OWNER'S ADDRESS or Less	see		OWNER'S ADDRESS or Lessee			
Name of Handler			Name of Handler			
CREDIT CARD ENTRIES ONL	LYVISAMASTERCARD		CREDIT CARD ENTRIES ONLY	Y VISAMASTE	ERCARD	
CARD NO.		EXPIRY DATE/	CARD NO.		EXPIR	RY DATE
actual owner(s) whose statements made in this	e registered owner(s) of the do name(s) I have entered above s entry. In consideration of the regulations of The Canadian K	g or that I am the authorized agent of the and accept full responsibility for all acceptance of this entry, I (we) agree to be cennel Club and by any additional rules and	actual owner(s) whose n statements made in this	registered owner(s) of name(s) I have entered entry. In consideration regulations of The Cana	the dog or that I am the a above and accept full res of the acceptance of this adian Kennel Club and by	ponsibility for all entry, I (we) agree to be
Signature of Owner or Ag	gent	Telephone Number	Signature of Owner or Age	ent	Telephone	Number
E-mail address			E-mail address			