



**OFFICIAL CKC ENTRY FORM**  
**Prince Edward Island Retriever Club**

Aug. 27, 2021 York, PE

**EVENT INFORMATION**

FEES: Entry Fee \$ \_\_\_\_\_ TCN Fee \$ \_\_\_\_\_ Total Enclosed \_\_\_\_\_

**TESTS ENTERED**

**Aug. 27, 2021**

**Field Trial**

\_\_\_ Qualifying \$35.00

\_\_\_ Junior \$40.00

\_\_\_ TCN Fees - \$11.50



**OFFICIAL CKC ENTRY FORM**  
**Prince Edward Island Retriever Club**

Aug. 27, 2021 York, PE

**EVENT INFORMATION**

FEES: Entry Fee \$ \_\_\_\_\_ TCN Fee \$ \_\_\_\_\_ Total Enclosed \_\_\_\_\_

**TESTS ENTERED**

**Aug. 27, 2021**

**Field Trial**

\_\_\_ Qualifying \$35.00

\_\_\_ Junior \$40.00

\_\_\_ TCN Fees - \$11.50

**OG INFORMATION**

Registered Name of Dog: \_\_\_\_\_ Call Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

CKC Registration # \_\_\_\_\_

**NUMBER:**

CKC ERN # \_\_\_\_\_ TCN # \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth Canada \_\_\_\_ Elsewhere \_\_\_\_  
Day Month Year

**BREEDER(S)**

**SIRE**

**DAM**

**REG'D OWNER OR Lessee**

**OWNER'S ADDRESS or Lessee**

**Name of Handler**

CREDIT CARD ENTRIES ONLY \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ AMERICAN EXPRESS \_\_\_\_\_

CARD NO. \_\_\_\_\_ EXPIRY DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**CARDHOLDER NAME (PLEASE PRINT)**

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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 Number

**E-mail address** \_\_\_\_\_

**DOG INFORMATION**

Registered Name of Dog: \_\_\_\_\_ Call Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

CKC Registration # \_\_\_\_\_

**NUMBER:**

CKC ERN # \_\_\_\_\_ TCN # \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth Canada \_\_\_\_ Elsewhere \_\_\_\_  
Day Month Year

**BREEDER(S)**

**SIRE**

**DAM**

**REG'D OWNER OR Lessee**

**OWNER'S ADDRESS or Lessee**

**Name of Handler**

CREDIT CARD ENTRIES ONLY \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ AMERICAN EXPRESS \_\_\_\_\_

CARD NO. \_\_\_\_\_ EXPIRY DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**CARDHOLDER NAME (PLEASE PRINT)**

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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 Number

**E-mail address** \_\_\_\_\_