



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

SIBERIAN HUSKY CLUB OF CANADA**APRIL 30 & MAY 1, 2015****April 30** Specialty Ob Trial [] **Canine Development Club**
May 1 All Breed Rally Trial [] **Nor West Rec Centre****Entries Close Tuesday, April 14, 2015 @ 6:00 p.m. EST**

Entry \$	Listing Fees \$	Catalogue \$	Total \$
Breed		Call Name	Sex
Obedience Classes [] Pre-Novice [] Ex Only [] Novice A [] Novice B [] Novice C [] Novice Intermediate [] Open A [] Open B [] Utility A [] Utility B		Rally Classes [] Novice A [] Novice B [] Intermediate [] Advanced A [] Advanced B [] Excellent A [] Excellent B	Jump Height:
Registered Name of Dog:			
Check One, Only Enter Number [] CKC Reg. no. [] CKC ERN no. [] CKC PEN no. [] Listed [] MCN no.		Date of Birth: d ____ m ____ y ____	Place of Birth: Canada () Elsewhere ()
Breeder:			
Sire:			
Dam:			
Reg'd Owner(s):			
Owner's Address:			
City:	Prov./State:	Code:	
Agent's Name (if any):			
Agent's Address:			
City:	Prov./State:	Code:	
Mail Confirmation to: Owner [] Agent []			
[] Visa [] MC Card No. _____ Expiry: ____/____			
Print Name of Cardholder:			
I Certify that I am the registered owner(s) of this dog/bitch or that I am the authorized agent of the owner(s) whose name(s) I have entered above and I 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 CKC and by any additional rules and regulations appearing in the premium list.			
Signature:		Phone	E Mail



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Jumps Height: Width:			
Registered Name of Dog:			
Check One, Only Enter Number [] CKC Reg. no. [] CKC ERN no. [] CKC PEN no. [] Listed [] MCN no.		Date of Birth: d ____ m ____ y ____	
		Place of Birth: Canada () Elsewhere ()	
Breeder:			
Sire:			
Dam:			
Reg'd Owner(s):			
Owner's Address:			
City:	Prov./State:	Code:	
Agent's Name (if any):			
Agent's Address:			
City:	Prov./State:	Code:	
Mail Confirmation to: Owner [] Agent []			
[] Visa [] MC Card No. _____ Expiry: ____/____			
Print Name of Cardholder:			
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Signature:		Phone	
		E Mail	