

 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">Dartmouth Kennel Club</h2>	Administrative use only
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<input type="checkbox"/> Obed Trial 1 (Sat)	<input type="checkbox"/> Rally Trial 1 (Sat)	Entry fees: ___ x \$26.00 = _____
<input type="checkbox"/> Obed Trial 2 (Sun)	<input type="checkbox"/> Rally Trial 2 (Sun)	Listing Fees: ___ x \$ 9.80 = _____
		Ex. Only: ___ x \$ 5.00 = _____
Use separate entry forms for Obedience and Rally	Catalog: ___ x \$ 5.00 = _____	
<input type="checkbox"/> Catalog	Total: _____	

Please Print or type CLEARLY

Enter in one only of the following classes				RALLY OBEDIENCE			
<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Novice A	<input type="checkbox"/> Advanced B	<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Novice A	<input type="checkbox"/> Advanced B
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent A	<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent A
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Excellent B	<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Excellent B
<input type="checkbox"/> Open B	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Advanced A	Rally Jump Height _____	<input type="checkbox"/> Open B	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Advanced A	Rally Jump Height _____
<input type="checkbox"/> Utility A	Jump Height _____			<input type="checkbox"/> Utility A	Jump Height _____		
<input type="checkbox"/> Utility B				<input type="checkbox"/> Utility B			

BREED	VARIETY	SEX
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NAME OF DOG

Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> CKC CCN # _____ <input type="checkbox"/> Listed	Date Of Birth _____ <small>Day Month Year</small>	Is this a puppy? YES ___ NO ___
Place Of Birth ___ Canada ___ Elsewhere		

BREEDER

SIRE

DAM

REG. OWNER

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
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Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this dog or that I am the authorized agent of the 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. Also, by signing this form I certify that I will not hold the Show giving Club, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner

Phone Number

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<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent A	<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent A
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Excellent B	<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Excellent B
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<input type="checkbox"/> Utility A	Jump Height _____			<input type="checkbox"/> Utility A	Jump Height _____		
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BREEDER

SIRE

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REG. OWNER

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