

OFFICIAL ENTRY FORM
(All-Breed Conformation , Obedience & Rally Trials)

Hosting Club : Avalon Kennel Club
Location: Gould's Arena, Gould's, NL

Conformation Shows

May 17th, 2014	1	<input type="checkbox"/>	Entry Fees:	\$_____
May 17th, 2014	2	<input type="checkbox"/>	Listing Fees:	\$_____
May 18th, 2014	3	<input type="checkbox"/>	Catalogue:	\$_____
May 18th, 2014	4	<input type="checkbox"/>		

Obedience Trials

May 17th, 2014	1	<input type="checkbox"/>	Total Enclosed:	\$_____
May 18th, 2014	2	<input type="checkbox"/>		

Rally Obedience

May 17th, 2014	1	<input type="checkbox"/>	<input type="checkbox"/> Rally Nov A	<input type="checkbox"/> Rally Adv B
May 18th, 2014	2	<input type="checkbox"/>	<input type="checkbox"/> Rally Nov B	<input type="checkbox"/> Rally Ex A
			<input type="checkbox"/> Rally Adv A	<input type="checkbox"/> Rally Ex B

Breed:		Variety:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Conformation		Obedience	Jump Hgt	
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Open A	
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Novice A	<input type="checkbox"/> Open B	
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Specials Open	<input type="checkbox"/> Novice B	<input type="checkbox"/> Utility	
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition only	<input type="checkbox"/> Novice C	_____	
		<input type="checkbox"/> Intermediate Novice		

Registered Name of Dog:

Check one and enter number here: _____	Date Of Birth	Puppy
<input type="checkbox"/> CKC Reg. #:	D ____ M ____ Year ____	<input type="checkbox"/> yes
<input type="checkbox"/> CKC ERN #:		<input type="checkbox"/> No
<input type="checkbox"/> CKC PEN #:		
<input type="checkbox"/> CKC Misc. #:	Place of Birth	
<input type="checkbox"/> Listed:	<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s):

Sire:

Dam:

Registered Owner(s): _____ **CKC Membership #:** _____

Owners Address:

City: _____ **Prov:** _____ **Postal Code:** _____

Name Of Agent:

Agents Address:

City: _____ **Prov:** _____ **Postal Code:** _____

Mail I.D. to: Owner Agent

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 names I have entered above and accept full responsibility for the 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 #:** _____

Email Address: _____

