



OFFICIAL CANIAN KENNEL CLUB FORM
SUDBURY & DISTRICT KENNEL CLUB
Mail to: Diana Edwards Show Services
1562 Route 203, Howick, Qc J0S 1G0

- () Friday Sept. 14 - #1
- () Friday Sept. 14 - #2 () Owner Handled - Sat.Sept 15 Show #4
- () Saturday Sept. 15 - #3
- () Saturday Sept. 15 - #4 () Sudbury Toy Dog Fanciers - Sat.Sept 15
- () Sunday Sept. 16 - #5
- () Sunday Sept. 16 - #6 () Catalogue

TOTAL: \$ _____ ENTRY : \$ _____ LISTING FEE: \$ _____ CATALOG: \$ _____
Breed _____ Variety _____ Sex _____

Enter in the following classes:

- Junior Puppy
- Senior Puppy
- 12 - 18 Months
- Canadian Bred
- Bred by Exhibitor
- Open
- Specials Only
- Exhibition Only
- *** Baby Puppy - \$15.00 / show
- Veteran (STDF Specialty only)

Reg.Name of Dog _____

Check One and Enter Number Here

- CKC Reg.No.
- CKC ERN No.
- CKC Misc.Cert.No.
- Listed (no C.K.C.No.)
- Date of Birth D ___ M ___ Y ___
- Is this a Puppy? YES NO
- Place of Birth Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____ Prov. _____ Postal Code _____

Name of Owner's Agent (if any) at the Show _____

Agent's Address _____

City _____ Prov. _____ Postal Code _____

Mail I.D to:

Owner

Agent

SIGNATURE OF OWNER OR AGENT _____

TELEPHONE NUMBER _____

I certify that I am the registered owner(s) of the 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.

email: _____

FAX SERVICES - VISA/ MASTERCARD / AMEX - (450) 825-0894

Card number: _____ Expiry date _____

Name of Card Holder: _____ **Security Code** _____