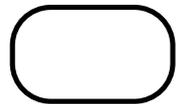




OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

**HAMILTON KENNEL CLUB INC.**

Mail to: Diana Edwards Show Services  
1562 Route 203, Howick, QC J0S 1G0



Conformation	Obedience	Camping
Fri. June 25 # 1 <input type="checkbox"/>		<input type="checkbox"/> with Hydro _____ nights
Fri. June 25 # 2 <input type="checkbox"/>		<input type="checkbox"/> No Hydro _____ nights
Sat. June 26 <input type="checkbox"/>	<input type="checkbox"/> Trial 1 <input type="checkbox"/> Trial 2	
Sun. June 27 <input type="checkbox"/>		
Pre-ordered Catalogue <input type="checkbox"/> \$8.00 / at the show \$10.00		

I ENCLOSE \$ \_\_\_\_\_ FOR TOTAL ENTRY FEES

Breed _____	Variety _____	Sex _____
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Enter in the following classes:

<input type="checkbox"/> Baby Puppy	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Open A
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Novice A	<input type="checkbox"/> Open B
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Novice B	<input type="checkbox"/> Utility A
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Novice C	<input type="checkbox"/> Utility B
<input type="checkbox"/> Canadian Bred		<input type="checkbox"/> Nov. Inter.	<input type="checkbox"/> Jump -

Reg.Name of Dog \_\_\_\_\_

Check One and Enter Number Here

<input type="checkbox"/> C.K.C.Reg.No.	Date of Birth	Is this a Puppy?
<input type="checkbox"/> C.K.C.ERN No.	D____M____Y____	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> C.K..C.Misc.Cert.No.	Place of Birth	
<input type="checkbox"/> Listed (no C.K.C.No.)	<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner(s) Address \_\_\_\_\_

City _____	Prov. _____	Postal Code _____
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Name of Owner's Agent (if any) at the Show) \_\_\_\_\_

Agent's Address \_\_\_\_\_

City _____	Prov. _____	Postal Code _____
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Mail / email I.D.to

Owner. \_\_\_\_\_

Agent \_\_\_\_\_

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO. \_\_\_\_\_

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 \_\_\_\_\_