OFFICIAL CANADIAN KENNEL CLUB FORM

CONFORMATION

(劉·斯·格) VICTO	DRIA COUNTY P	KENNEL CL	_UB	
	Fri. APRIL 29, 20	16 Show #1		
	Fri. APRIL 29, 20	16 Show #2	ENTRY FEES	
	Sat. APRIL30, 20	16	(\$30.00 per s LISTING FEE	•
	Sun. MAY1, 2016	3	(\$9.60 per sh	
CLOSING DATE: 8 p.m. WEDNESDAY, APRIL 13, 2016			BABY PUPP	
Make fees payable to			(\$10.00 per s	,
Victoria County Kennel Club and mail to:			(\$10.00)	ONLY \$
MJN Show Services			CATALOGUE (\$5.00 each)	\$
9 Samya Court Scarborough, ON M1R 2A4	Please type or pri	int cloarly	TOTAL enclo	sed \$
Breed	riease type or pri	Variety	TO TAL GROOM	Sex
bieeu		variety		Sex
Enter in the following Classes:				
Junior Puppy		Open		
Senior Puppy		Specials O		
12 - 18 Month		Baby Pupp		
Canadian Bred	Į	Exhibition (Only	
☐ Bred by Exhibitor				
Reg. Name of Dog				
Check One – and – Enter Number he	re	Date of Birth		Is this a puppy?
CKC Reg. No.		D M	Y	YES NO
CKC ERN No.	L			
☐ CKC Misc. Cert. No.			Place of	Birth
Listed			☐ Cana	da 🔲 Elsewhere
Breeder(s)				
Sire				
Dam				
Reg'd Owner(s)				
Owner's Address				
City	Prov	. Co	ode	
Name of Owner's Agent (if any)	I	<u> </u>		
at the Show Agent's Address				
Agents Address				
City	Prov.	. Co	ode	
Mail I.D. to 🗅 Owner or 🚨 Agent	Email			
FAX/CREDIT CARD ENTRIES Amer Express Mastercard VIS	SA Card No.			Expiry
Name of Cardholder	Si	gnature		

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT TELEPHONE NO.

OFFICIAL CANADIAN KENNEL CLUB FORM

CONFORMATION



VICTORIA	COUNTY	KENNEL	CLUB

	JRIA COUN	TY KENNEL	CLUB		
	Fri. APRIL 29), 2016 <i>Show #</i>	‡1		
	Fri. APRIL 29, 2016 Show #2			TRY FEES 0.00 per show)	\$
☐ Sat. APRIL30, 2016				TING FEES	\$
	Sun. MAY1, 2	2016		.60 per show)	
CLOSING DATE: 8 p.m. WEDNESDAY, APRIL 13, 2016				3Y PUPPY 0.00 per show)	\$
Make fees payable to Victoria County Kennel Club and mail to:				HIBITION ONLY 0.00)	′\$
MJN Show Services 9 Samya Court				TALOGUE .00 each)	\$
Scarborough, ON M1R 2A4	Please type	or print clearly	TO	TAL enclosed	\$
Breed		Varie	ty	S	Sex
Enter in the following Classes: Junior Puppy Senior Puppy 12 - 18 Month Canadian Bred Bred by Exhibitor		Open Specials Baby Pt Exhibition	ıрру [°]		
Reg. Name of Dog					
Check One – and – Enter Number he	re	Date of Birth		Is thi	is a puppy?
CKC Reg. No.		D I	M Y _	YES	NO
CKC Misc. Cert. No.				Place of Birth	☐ Elsewhere
Breeder(s)			•		
Sire					
Dam					
Reg'd Owner(s)					
Owner's Address					
City		Prov.	Code		
Name of Owner's Agent (if any) at the Show					
Agent's Address					
City		Prov.	Code		
Mail I.D. to ☐ Owner or ☐ Agent	Email				
FAX/CREDIT CARD ENTRIES Amer Express Mastercard VIS	SA Card No				Expiry
Name of Cardholder		Signature			

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