



CLUB CANIN DU FJORD

Conformation

- Saturday July 18 AM
- Saturday July 18 PM
- Sunday July 19 AM
- Sunday July 19 PM

MAIL TO :

Pascale Pontois
 1890, Rg des Chutes
 Ste Ursule (Qc), J0K 3M0
 Catalog \$8.00 (pre-ordered only)

ENTRIES CLOSE : JULY 8ND , 9H00PM

BREED		VARIETY	SEX
CONFORMATION			
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred by Exhibitor	Baby Puppy <input type="checkbox"/>	
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	Veteran <input type="checkbox"/>	
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Special Only	Altered <input type="checkbox"/>	
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only		
REG. NAME OF DOG			
CHECK ONE		DATE OF BIRTH	PUPPY?
<input type="checkbox"/> CKC REG. NO	<input type="checkbox"/> CKC MISC. CERT. NO	D M Y	<input type="checkbox"/> YES
<input type="checkbox"/> CKC ERN NO	<input type="checkbox"/> LISTED		<input type="checkbox"/> NO
ENTER NUMBER HERE _____		PLACE OF BIRTH	
		<input type="checkbox"/> CANADA	<input type="checkbox"/> ELSEWHERE
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			
CITY		PROV.	PC
NAME OF OWNER'S AGENT			
AGENT'S ADDRESS			
CITY		PROV	PC
MAIL I.D. TO <input type="checkbox"/> OWNER OR <input type="checkbox"/> AGENT			
<input type="checkbox"/> VISA		<input type="checkbox"/> MASTERCARD	
CARD # _____		Verifi Number Rear _____	
		EXPIRY _____/____	
CARD HOLDER NAME _____			

I 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.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.