



OFFICIAL CANADIAN KENNEL CLUB FORM

CONFORMATION

KILBRIDE AND DISTRICT KENNEL CLUB

- Friday, AUGUST 7, 2015
- Saturday, AUGUST 8, 2015
- Sunday, AUGUST 9, 2015

CLOSING DATE: 8 p.m.

Wednesday, July 22, 2015

Make fees payable to

KILBRIDE AND DISTRICT KENNEL CLUB

and mail to:

MJN Show Services

9 Samya Court

Scarborough, ON M1R 2A4

Please type or print clearly

Entry Fees (\$31.00 per show)	\$ _____
Listing Fees (\$9.60 per show)	\$ _____
Exhibition Only (\$10.00)	\$ _____
Baby Puppy (\$15.00 Friday only)	\$ _____
Brace (\$10.00 Friday only)	\$ _____
All Breed Sweepstakes (\$15.00)	\$ _____
Catalogue (\$10.00 each)	\$ _____
TOTAL enclosed	\$ _____

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open | <input type="checkbox"/> Sweepstakes |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Specials Only | Class _____ |
| <input type="checkbox"/> 12 - 18 Month | <input type="checkbox"/> Baby Puppy (Friday only) | |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Brace (Friday only) | <input type="checkbox"/> Owner/Handler Competition |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | |

Reg. Name of Dog _____

Check One – and – Enter Number here

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. Cert. No.
- Listed

Date of Birth	Is this a puppy?
D _____ M _____ Y _____	YES ___ NO ___

Place of Birth
 Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____	Prov. _____	Code _____
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Name of Owner's Agent (if any)

at the Show _____

Agent's Address _____

City _____	Prov. _____	Code _____
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Mail I.D. to Owner or Agent Email _____

FAX/CREDIT CARD ENTRIES

Amer Express Mastercard VISA Card No. _____ Expiry _____

Name of Cardholder _____ Signature _____

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. _____