



OFFICIAL CANADIAN KENNEL CLUB FORM

CONFORMATION

BRANTFORD & DISTRICT KENNEL & OBEDIENCE CLUB INC.

- Fri. DEC. 4, 2015
- Sat. DEC. 5, 2015
- Sun. DEC. 6, 2015

CLOSING DATE: 8:00 p.m.

Monday, November 23, 2015

Make fees payable to

**BRANTFORD & DISTRICT KENNEL
& OBEDIENCE CLUB INC.**

and mail to:

MJN Show Services

9 Samya Court

Scarborough, ON M1R 2A4

- Entry Fees (\$30.00 per show) \$ _____
- Listing Fees (\$9.60 per show) \$ _____
- Veterans (\$10.00 Friday Only) \$ _____
- Exhibition Only (\$10.00) \$ _____
- Baby Puppy (\$10.00 per show) \$ _____
- Catalogue (\$8.00 each) \$ _____

Please type or print clearly

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

- | | |
|--|--|
| <input type="checkbox"/> Junior Puppy
<input type="checkbox"/> Senior Puppy
<input type="checkbox"/> 12 - 18 Month
<input type="checkbox"/> Canadian Bred
<input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Open
<input type="checkbox"/> Specials Only
<input type="checkbox"/> Veterans (<i>Friday Only</i>)
<input type="checkbox"/> Baby Puppy
<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. _____



OFFICIAL CANADIAN KENNEL CLUB FORM
SPECIALTY CONFORMATION ENTRY FORM
Brantford & District Kennel & Obedience Club Inc.

CLOSING DATE: 8 p.m. Monday, November 23, 2015
Make fees payable to Brantford & District Kennel & Obedience Club Inc.
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Entry fee	\$30.00	_____
Listing fee	\$9.60	_____
Sweepstakes	\$10.00	_____
Baby Puppy	\$10.00	_____
Unofficial	\$10.00	_____
Non-Regular	\$15.00	_____
Exhibition Only	\$10.00	_____
Catalogue	\$8.00	_____
TOTAL		_____

Saturday December 5, 2015

- American Cocker Spaniel Club Of Central Ontario
- Great Dane Club Of Ontario
- Club VI Ontario

Consult individual specialties for classes offered

- | | | |
|---|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Veterans 10 Yrs + | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Specials Only | SWEEPSTAKES |
| <input type="checkbox"/> 12 to 15 months | <input type="checkbox"/> Sexually Altered | <input type="checkbox"/> 3 to 6 months |
| <input type="checkbox"/> 15 to 18 months | UNOFFICIAL CLASSES | <input type="checkbox"/> 6 to 9 months |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Stripped Down Class | <input type="checkbox"/> 9 to 12 months |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Parade of Titleholders | <input type="checkbox"/> 12 to 18 months |
| <input type="checkbox"/> Bred by Exhibitor | NON-REG. CLASSES | <input type="checkbox"/> 12 to 15 months |
| <input type="checkbox"/> Open (colour if req'd) | <input type="checkbox"/> Baby Puppy (3-6 mo) | <input type="checkbox"/> 15 to 18 months |
| | <input type="checkbox"/> Stud Dog | |
| <input type="checkbox"/> Veterans | <input type="checkbox"/> Brood Bitch | <input type="checkbox"/> Catalogue |
| <input type="checkbox"/> Veterans 7 to 10 Yrs | <input type="checkbox"/> Brace | |

Breed	Variety/Colour	Sex
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Reg. Name of Dog _____

Check One – and – Enter Number here <input type="checkbox"/> CKC Reg. No. _____ <input type="checkbox"/> CKC ERN No. _____ <input type="checkbox"/> CKC Misc. Cert. No. _____ <input type="checkbox"/> Listed	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> 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	
<input type="checkbox"/> Amer Express <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA Card No. _____ Expiry _____	Signature _____
Name of Cardholder _____	

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. I assume full responsibility for confirming receipt of all emailed entries with the Show Secretary.