



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

SOCIÉTÉ CANINE DE THETFORD MINES

All Breeds

- Saturday May 23th AM
- Saturday May 23th PM
- Sunday May 24th AM
- Sunday May 24th PM

Obedience

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-
-

MAIL TO :

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

ENTRIES CLOSE : MAY 6TH, 9:00PM

BREED		VARIETY	SEX
CONFORMATION		OBEDIENCE	
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred by Exhibitor	Novice A <input type="checkbox"/> B <input type="checkbox"/>	Pre-Novice <input type="checkbox"/>
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	Open A <input type="checkbox"/> B <input type="checkbox"/>	Novice C <input type="checkbox"/>
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Special Only	Utility A <input type="checkbox"/> B <input type="checkbox"/>	Novice Int. <input type="checkbox"/>
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only	Jump heights _____	
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	Verifi Number Rear _____	
CARD # _____		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.