

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

Association Canine de la Mauricie Inc.

Mail to : Pascale Pontois,

1890 Rang des Chutes, Ste Ursule, Qc J0K 3M0



OBEDIENCE

RALLY- O.

- DATE Saturday June 30, 2018 Trial #1 Friday June 29 2018.... Trial # 1
 Saturday June30, 2018 Trial #2 Friday June 29, 2018 Trial # 2
 Sunday July 1 2018 Trial # 3 Saturday June 30, 2018 Trial # 3
 Sunday July 1 2018 Trial # 4 Saturday June 30 2018 Trial #4
 Sunday July 1 2018 Trial #5
 Sunday July 1 2018 Trial #6

Total: \$ _____ Entry Fees: \$ _____ List Fees: \$ _____ Catalogue: \$ _____

BREED	VARIETY	SEX
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INCRIVEZ DANS LES CLASSES SUIVANTES :

- | | | | |
|--------------------------------------|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> PRÉ-NOVICE | <input type="checkbox"/> OUVERT H B | <input type="checkbox"/> RALLY-O | |
| <input type="checkbox"/> NOVICE A | <input type="checkbox"/> OUVERT 18 A | <input type="checkbox"/> NOVICE A | <input type="checkbox"/> ADVANCED B |
| <input type="checkbox"/> NOVICE B | <input type="checkbox"/> OUVERT 18 B | <input type="checkbox"/> NOVICE B | <input type="checkbox"/> MASTER |
| <input type="checkbox"/> NOVICE C | <input type="checkbox"/> UTILITÉ A | <input type="checkbox"/> INTERMEDIATE | <input type="checkbox"/> EXCELLENT A |
| <input type="checkbox"/> NOVICE INT. | <input type="checkbox"/> UTILITÉ B | <input type="checkbox"/> ADVANCED A | <input type="checkbox"/> EXCELLENT B |
| <input type="checkbox"/> OUVERT HA | <input type="checkbox"/> EXHIBITION ONLY | | |

Saut ... Hauteur : _____

REGISTERED

NAME OF DOG

- C.K.C. REG. No.
 C.K.C. ERN No.
 C.K.C. Misc. Cert. No.
 Listed (no C.K.C. No.)

DATE OF BIRTH

D ____ M ____ Y ____

Is this a Puppy ?

YES NO

PLACE OF BIRTH

Canada Elsewhere

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City

Prov.

Postal Code

E-mail

Name of Owner's Agent (if any) at the Show

Agent's Address:

City

Prov.

Postal Code

E-mail

Mail I.D to

Owner

Agent

Fax entries must be accompanied by a Visa or Master Card number. Verification Number Rear _____

Visa Master Card Card No. _____ Expiry ____ / ____

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.

SIGNATURE OF OWNER

TELEPHONE NUMBER