



OFFICIAL CANADIAN KENNEL CLUB FORM
SPECIALTY CONFORMATION ENTRY FORM
Kilbride & District Kennel Club
CLOSING DATE: 8 p.m. WEDNESDAY, July 23, 2014

Make fees payable to **Kilbride & District Kennel Club** and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Entry fee	\$30.00	_____
Listing fee	\$9.50	_____
Sweepstakes	\$15.00	_____
Non-Regular	\$15.00	_____
Exhibition Only	\$10.00	_____
Catalogue	\$10.00	_____
TOTAL		_____

Friday, August 8, 2014

- Boxer Club of Canada
 Boxer Club of Central Ontario

Consult individual specialties for classes offered

- | | | |
|--|--|--|
| <input type="checkbox"/> Junior Puppy | NON-REG. CLASSES | SWEEPSTAKES |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Stud Dog | <input type="checkbox"/> 6 to 9 months |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Brood Bitch | <input type="checkbox"/> 9 to 12 months |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Brace | <input type="checkbox"/> 12 to 18 months |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | |
| <input type="checkbox"/> Open | | VETERANS SWEEPS |
| <input type="checkbox"/> Veterans | | <input type="checkbox"/> 7 years & over |
| <input type="checkbox"/> Specials Only | | |

Catalogue

Breed	Variety/Colour	Sex
-------	----------------	-----

Reg. Name of Dog

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

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Code
------	-------	------

Name of Owner's Agent (if any)

at the Show

Agent's Address

City	Prov.	Code
------	-------	------

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

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.



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<input type="checkbox"/> CKC Reg. No. _____	D _____ M _____ Y _____	YES ___ NO ___
<input type="checkbox"/> CKC ERN No. _____		
<input type="checkbox"/> CKC Misc. Cert. No. _____	Place of Birth	
<input type="checkbox"/> Listed	<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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Baby Puppy	\$15.00	_____
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Exhibition Only	\$10.00	_____
Catalogue	\$10.00	_____
TOTAL		_____

Saturday, August 9, 2014

Consult individual specialties for classes offered

- | | |
|--|---|
| <input type="checkbox"/> Basenji Club Of Canada | <input type="checkbox"/> Portuguese Water Dog Club Of Canada |
| <input type="checkbox"/> Southern Ontario Scent Hounds | <input type="checkbox"/> Association Of Great Dane Fanciers |
| <input type="checkbox"/> Dogs Of France Southern Ontario | <input type="checkbox"/> Black Russian Terrier Club Of Canada |
| <input type="checkbox"/> Bullmastiff Fanciers Of Canada | <input type="checkbox"/> Pomeranian Club Of Ontario |
| <input type="checkbox"/> Great Pyrenees Club Of Canada | <input type="checkbox"/> Ontario Bouvier Des Flandres |

REG. CLASSES

- | | |
|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Three Generations |
| <input type="checkbox"/> 12-15 Months | <input type="checkbox"/> Specials Only |
| <input type="checkbox"/> 15-18 Months | <input type="checkbox"/> Sexually Altered |
| <input type="checkbox"/> 12-18 Months | NON-REG. CLASSES |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Baby Puppy (3-6 mo) |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Stud Dog |
| <input type="checkbox"/> Open (colour if req'd) | <input type="checkbox"/> Brood Bitch |
| | <input type="checkbox"/> Brace |
| | <input type="checkbox"/> Team |
| | <input type="checkbox"/> Exhibition Only |
| | <input type="checkbox"/> Parade of Veterans |

UNOFFICIAL CLASSES

- | |
|------------------------------------|
| <input type="checkbox"/> Best Head |
| <input type="checkbox"/> Best Coat |
| <input type="checkbox"/> Best Tail |
| <input type="checkbox"/> Best Gait |
| <input type="checkbox"/> Catalogue |

SWEEPSTAKES

- Puppy
 Class _____

VETERANS SWEEPS

- Veterans
 Class _____
- Catalogue

Breed	Variety/Colour	Sex
-------	----------------	-----

Reg. Name of Dog

Check One – and – Enter Number here	Date of Birth	Is this a puppy?
<input type="checkbox"/> CKC Reg. No. _____	D _____ M _____ Y _____	YES ___ NO ___
<input type="checkbox"/> CKC ERN No. _____		
<input type="checkbox"/> CKC Misc. Cert. No. _____	Place of Birth	
<input type="checkbox"/> Listed	<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)
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Agent's Address _____

City	Prov.	Code
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FAX/CREDIT CARD ENTRIES			
<input type="checkbox"/> Amer Express	<input type="checkbox"/> Mastercard	<input type="checkbox"/> VISA	Card No. _____ Expiry _____
Name of Cardholder _____		Signature _____	

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REG. CLASSES

- | | |
|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Three Generations |
| <input type="checkbox"/> 12-15 Months | <input type="checkbox"/> Specials Only |
| <input type="checkbox"/> 15-18 Months | <input type="checkbox"/> Sexually Altered |
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| | <input type="checkbox"/> Brace |
| | <input type="checkbox"/> Team |
| | <input type="checkbox"/> Exhibition Only |
| | <input type="checkbox"/> Parade of Veterans |

UNOFFICIAL CLASSES

- | |
|------------------------------------|
| <input type="checkbox"/> Best Head |
| <input type="checkbox"/> Best Coat |
| <input type="checkbox"/> Best Tail |
| <input type="checkbox"/> Best Gait |
| <input type="checkbox"/> Catalogue |

SWEEPSTAKES

- Puppy
 Class _____

VETERANS SWEEPS

- Veterans
 Class _____
- Catalogue

Breed	Variety/Colour	Sex
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Reg. Name of Dog

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<input type="checkbox"/> CKC ERN No. _____		
<input type="checkbox"/> CKC Misc. Cert. No. _____	Place of Birth	
<input type="checkbox"/> Listed	<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			
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Sunday, August 10, 2014

- Southern Counties Hound Breeds Association Great Pyrenees Club Of Southern Ontario
 German Shepherd Dog Club Of Canada Association Of Great Dane Fanciers
 Greater Mid-Ontario Doberman Fanciers Working & Herding Club Of Southern Ontario

Consult individual specialties for classes offered

REG. CLASSES

- Junior Puppy
 Senior Puppy
 12-15 Months
 15-18 Months
 12-18 Months
 Canadian Bred
 Bred by Exhibitor
 Open (colour if req'd)

- Veterans (age if req'd)
 Specials Only
 Sexually Altered

NON-REG. CLASSES

- Baby Puppy (3-6 mo)
 Stud Dog
 Brood Bitch
 Brace
 Exhibition Only

SWEEPSTAKES

- Puppy
 Class _____

VETERANS SWEEPS

- Veterans
 Class _____

- Catalogue

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
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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)
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Amer Express Mastercard VISA Card No. _____ Expiry _____

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