



OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION
London Canine Association Inc.

- Fri. JULY 13, 2018 (Show 1)
 - Sat. JULY 14, 2018 (Show 2)* Entry Fees (\$31.00/show) \$ _____
 - Sat. JULY 14, 2018 (Show 3)* Listing Fees (\$11.30/show) \$ _____
 - Sun. JULY 15, 2018 (Show 4)* Baby Puppy class(\$12.00/show) \$ _____
 - Sun. JULY 15, 2018 (Show 5)* Veterans class (\$15.00/show) \$ _____
- * Limited Entry**
- Brace/Exhibition Only/Unofficial Classes (\$10.00 each) \$ _____
 - Altered (\$15.00/show) \$ _____
 - Catalogue (\$10.00 ea) \$ _____
 - TOTAL enclosed \$ _____

CLOSING DATE: 8 p.m.
Wednesday, June 27, 2018
or when the limit of 200 dogs
for the Sat. & Sun. shows are reached
London Canine Association Inc.
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

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"/> Open	<input type="checkbox"/> Altered Class
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> 12 - 18 Month	<input type="checkbox"/> Baby Puppy	<input type="checkbox"/> Special - Enter all 5 shows with
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Veterans	<i>the SAME DOG in the Bred By Class to</i>
<input type="checkbox"/> Bred by Exhibitor	<input type="checkbox"/> Brace	<i>pay one price of \$125.00.</i>

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)
 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. _____