



OFFICIAL CANADIAN KENNEL CLUB FORM

**MITED ENTRY OBEDIENCE**

**SAULT STE. MARIE KENNEL CLUB**

**CLOSING DATE: 6 p.m.  
SAT. MAY 3, 2014**  
or when the limit is reached  
Make fees payable to  
**Sault Ste. Marie Kennel Club**  
and mail to:  
MJN Show Services  
9 Samya Court  
Scarborough, ON M1R 2A4

- Trial #1—Sat. May 17, 2014
- Trial #2—Sat. May 17, 2014
- Trial #3—Sun. May 18, 2014
- Trial #4—Sun. May 18, 2014

ENTRY FEES \$ \_\_\_\_\_  
(\$28.00 per trial)

VETERANS \$ \_\_\_\_\_  
(\$12.00 per trial)

LISTING FEES \$ \_\_\_\_\_  
(\$9.50 per trial)

CATALOGUE \$ \_\_\_\_\_  
(\$6.00 each)

TOTAL enclosed \$ \_\_\_\_\_

*Please type or print clearly*

Breed _____	Sex _____
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Enter in the following Classes:	Jumps: _____
<input type="checkbox"/> Novice A <input type="checkbox"/> Open B <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Novice B <input type="checkbox"/> Utility A <input type="checkbox"/> Veterans (Saturday, Trial #1 only) <input type="checkbox"/> Novice C <input type="checkbox"/> Utility B <input type="checkbox"/> Open A <input type="checkbox"/> Pre-Novice	Height _____
	Width _____

Reg. Name of Dog \_\_\_\_\_

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

Agent's Address \_\_\_\_\_

City _____	Prov. _____	Code _____
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Mail I.D. to  Owner or  Agent    Email \_\_\_\_\_

<b>FAX/CREDIT CARD ENTRIES</b>	
<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.

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_



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City _____	Prov. _____	Code _____
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City _____	Prov. _____	Code _____
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