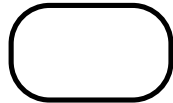




HAMILTON KENNEL CLUB INC.

Mail to: Diana Edwards Show Services
1562 Route 203, Howick, QC J0S 1G0



SPECIALTY:

SALUKI CLUB OF CANADA

Camping with Hydro _____ nights

Camping -No Hydro _____ nights

Pre-ordered Catalogue \$8.00 / at the show \$10.00
I ENCLOSE \$ _____ FOR TOTAL ENTRY FEES

Entries Close June 11, 2013

Breed	Variety	Sex
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Enter in the following classes:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open | <input type="checkbox"/> Stud Dog | <input type="checkbox"/> Sweeps 6-9 |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Veterans | <input type="checkbox"/> Brood Bitch | <input type="checkbox"/> Sweeps 9-12 |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Brace | <input type="checkbox"/> Sweeps 12-18 |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Exhibition Only | <input type="checkbox"/> Native Costume | <input type="checkbox"/> Vet. Sweeps 7-10 yrs |
| <input type="checkbox"/> Bred By Exhibitor | <input type="checkbox"/> Altered | <input type="checkbox"/> Coursing Hound | <input type="checkbox"/> Vet. Sweeps 10-12 yrs |
| | | | <input type="checkbox"/> Vet Sweeps 12+ |

Reg.Name of Dog _____

Check One and Enter Number Here

- 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 _____

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

Agent's Address _____

City _____

Prov. _____

Postal Code _____

Mail / email I.D.to

- Owner.
 Agent

SIGNATURE OF OWNER OR AGENT _____

TELEPHONE NO. _____

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, (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.

Email: _____

FAX SERVICES - VISA / Mastercard / Amex (450) 825-0894

Card number: _____ Expiry date _____

Name of Card Holder: _____