



OFFICIAL CANADIAN KENNEL CLUB FORM

## SPECIALTY SHOW

### BOXER CLUB OF CENTRAL ONTARIO

**Saturday, March 12, 2016**

ENTRY FEES (\$30.00) \$ \_\_\_\_\_  
LISTING FEES (\$9.60) \$ \_\_\_\_\_  
EXHIBITION ONLY (\$10.00) \$ \_\_\_\_\_  
SEXUALLY ALT. (\$30.00) \$ \_\_\_\_\_  
NON REGULAR (\$10.00) \$ \_\_\_\_\_  
CATALOGUE (\$5.00 each) \$ \_\_\_\_\_  
TOTAL enclosed \$ \_\_\_\_\_

CLOSING DATE: 8 p.m.  
Monday, February 29, 2016  
Make fees payable to  
Scarborough Kennel Club  
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"/> Stud Dog    | <input type="checkbox"/> Camping \$45.00 |
| <input type="checkbox"/> Senior Puppy      | <input type="checkbox"/> Veteran          | <input type="checkbox"/> Brood Bitch | <i>please include camping</i>            |
| <input type="checkbox"/> 12 - 18 Month     | <input type="checkbox"/> Specials Only    |                                      | <i>fee with entry fees</i>               |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Exhibition Only  |                                      |  |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Sexually Altered |                                      |  |

Reg. Name of Dog

Check One – and – Enter Number here

- ☐ CKC Reg. No.  
☐ CKC ERN No.  
☐ CKC Misc. Cert. No.  
☐ Listed

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.

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

☐ 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.