



OFFICIAL CANADIAN KENNEL CLUB FORM

OBEDIENCE TRIAL

**Canadian Shetland Sheepdog Association
2018 NATIONAL SPECIALTY TRIAL**

Friday, May 18, 2018
(for Shetland Sheepdogs only)

CLOSING DATE: 6 p.m.
SAT. MAY 5, 2018
Make fees payable to
Cathie Kraemer
and mail to:
MJN Show Services
9 Samya Court
Scarborough, ON M1R 2A4

Please type or print clearly

ENTRY FEES \$ _____
(\$32.00 per class)
LISTING FEES \$ _____
(\$11.30 per dog)
UNOFFICIAL CLASS \$ _____
(\$15.00 per class)
PREPAID CATALOGUE \$ _____
(\$10.00 each)
TOTAL enclosed \$ _____

Breed	Shetland Sheepdog	Sex	
Enter in the following Classes:		Jumps:	
<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Open HA	<input type="checkbox"/> Utility B	<input type="checkbox"/> Brace
<input type="checkbox"/> Novice A	<input type="checkbox"/> Open HB	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Team
<input type="checkbox"/> Novice B	<input type="checkbox"/> Open 18A	<input type="checkbox"/> Graduate Novice	
<input type="checkbox"/> Novice C	<input type="checkbox"/> Open 18B	<input type="checkbox"/> Graduate Open	Height _____
<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Utility A	<input type="checkbox"/> Veterans	Width _____

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	

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		
<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. _____