
	OFFICIAL CANADIAN KENNEL CLUB FORM LIMITED ENTRY OBEDIENCE TRIALS MUSKOKA DISTRICT KENNEL CLUB	
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Closing date Oct 14/16 8 p.m. or when limit reached Fees payable to MDKC \$30. Per entry 4 entries same dog \$105. DAY OF ENTRY \$35. Per entry	<input type="checkbox"/> Trial 1 Sat. Oct. 29 <input type="checkbox"/> Trial 2 Sat. Oct. 29 <input type="checkbox"/> Trial 3 Sat. Oct. 29 <input type="checkbox"/> Trial 4 Sat. Oct. 29	Entry fee \$ _____ Listing fee \$ _____ Exhibition only \$ _____ TOTAL \$ _____
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BREED	SEX: male ___ female ___
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CLASSES <input type="checkbox"/> Pre Novice <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Novice A <input type="checkbox"/> Open A <input type="checkbox"/> Utility A <input type="checkbox"/> Novice B <input type="checkbox"/> Open B <input type="checkbox"/> Utility B <input type="checkbox"/> Novice C <input type="checkbox"/> Exhibition Only	JUMPS Height _____ Width _____
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REGISTERED NAME OF DOG:

<input type="checkbox"/> CKC Reg. # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC Misc. Cert. # <input type="checkbox"/> Listed #	Date of Birth M ___ D ___ Y ___ Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere
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Breeder(s)

Sire:

Dam:

Reg'd Owner(s)

Owner's Address

City	Prov.	P.C.
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Agent



Address

City	Prov.	P.C.
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I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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.		
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Signature of owner or agent	Telephone #
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Contact - owner agent email: _____

	OFFICIAL CANADIAN KENNEL CLUB FORM LIMITED ENTRY RALLY TRIALS MUSKOKA DISTRICT KENNEL CLUB	
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Closing date Oct 14/16 8 p.m. or when limit reached Fees payable to MDKC \$30. Per entry 3 entries same dog \$80. DAY OF ENTRY \$35. Per entry	<input type="checkbox"/> Trial 1 Sun. Oct. 30 <input type="checkbox"/> Trial 2 Sun. Oct. 30 <input type="checkbox"/> Trial 3 Sun. Oct. 30	Entry fee \$ _____ Listing fee \$ _____ Exhibition only \$ _____ TOTAL \$ _____
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BREED	SEX: male ___ female ___
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CLASSES <input type="checkbox"/> Novice A <input type="checkbox"/> Advanced A <input type="checkbox"/> Excellent A <input type="checkbox"/> Novice B <input type="checkbox"/> Advanced B <input type="checkbox"/> Excellent B <input type="checkbox"/> Intermediate <input type="checkbox"/> Exhibition Only	JUMPS Height _____ Width _____
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REGISTERED NAME OF DOG:

<input type="checkbox"/> CKC Reg. # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC Misc. Cert. # <input type="checkbox"/> Listed #	Date of Birth M ___ D ___ Y ___ Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere
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Breeder(s)

Sire:

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Reg'd Owner(s)

Owner's Address

City	Prov.	P.C.
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Agent

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