

Owner's CKC Membership No:

☐ Owner

Name of Agent (if any):

Agent's Address:

Mail to be sent to:

## OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM TRACKING

## ALL-BREED and MIXED BREED TRACKING TEST Saturday & Sunday April 25<sup>th</sup> & 26<sup>th</sup>, 2020

For office use only.

Limited Entries: 8 UTDs and 6 UTDXs						
ENTRY FEES:	UTD: \$75.00 U	TDX: \$90.00	CKC LISTING FE	E: \$10.50		
Make cheques payable to: <b>F.P.O.T.C.</b> and <b>mail</b> to:						
Nicole Ryan						
1743 Sparrow Place Courtenay V9N9A8						
CLOSING DATE: Thursday, April 9th, 2020 @ 6:00 pm						
Fees: EntryFee:\$	ListingFee:\$		Total:\$			
Test Entered: UTD	итрх 🗆			Worker Draw		
Registered Name of Dog:						
Breed:		Variety:		☐ MALE ☐ FEMALE		
Check One and Enter Number  ☐ CKC Registration # ☐ CKC Miscellaneous #  ☐ CKC PEN# ☐ CKC CCN #  ☐ CKCERN#		Date of Birth:	D M	Y		
		Place of Birth: ☐ Canada ☐ Elsewhere				
☐ Listed ☐ TCN	#					
Breeder(s):						
Sire:						
Dam:						
Reg. Owners:						
Owner's Address:						

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 responsible 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.

or

☐ Agent

Signature of Owner or Agent	Telephone Number	E-Mail Address