

Signature of Owner or Agent

Telephone Number

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM **2020**

MARITIME GOLDEN RETRIVER CLUB WORKING CERTIFICATE TEST

EVENT INFORMATION Fees: Entry Fee \$	Listing Fee \$		Total Enclosed \$		
TEST ENTERED:					
	□ WC □ WCI □ WCX				
DOG INFORMATION					
Registered Name of Dog:					
Call Name:					
Breed:		Variety	Male	□ Female □	
□ CKC Registration # □ CKC Miscellaneous #					
□ CKC ERN # □ CKC PEN #	□ Listed	Insert Number Hei			
dd mm yy Date of Birth: ☐ Canada ☐ Elsewhere					
Breeder:					
Sire:					
Dam:					
OWNER(S) & AGENT INF	ORMATION				
Registered Owner(s):			Memb	ership No	
			Memb	ership No	
			Memb	ership No	
Handler:					
Owner's Address:					
Name of Agent (if any):					
Agent's Address:Street Add	dress	City	Prov.	Postal Code	
I CERTIFY that I am the registere and accepted full responsibility for rules and regulations of The Cana	r all statements n	nade in this entry. In cons	sideration of the accepta	ance of this entry, I (we) agree to be bound by the

Email