



**OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION**

WINE COUNTRY KENNEL CLUB

CLOSING DATE: 8PM
Saturday, Sept. 23,
2017
Make fees payable
to:
Wine Country Kennel
Club
Mail to: M. Brown
9 Harvest Oak Dr
St. Catharines, ON

- Saturday Oct. 7, 2017 Show**
- Sunday Oct. 8, 2017 Show #1**
- Sunday Oct.8, 2017 Show #2**
- Monday, Oct. 9, 2017**

Entry Fees
\$30.00 per show \$ _____
Exhibition Only \$10.00 per show \$ _____
Baby Puppy \$9.50 per show \$ _____
Listing Fee \$12.00 per show \$ _____
Catalogue \$8.00 each \$ _____
TOTAL: _____

Breed	Variety	Sex
<input type="checkbox"/> JUNIOR PUPPY	<input type="checkbox"/> BRED BY EXHIBITOR	
<input type="checkbox"/> SENIOR PUPPY	<input type="checkbox"/> OPEN	
<input type="checkbox"/> 12 - 18 MONTH	<input type="checkbox"/> SPECIALS ONLY	
<input type="checkbox"/> CANADIAN BRED	<input type="checkbox"/> BABY PUPPY	
	<input type="checkbox"/> EXHIBITION ONLY	

Reg. Name of Dog _____

Check One and Enter Number Here

<input type="checkbox"/> CKC Reg. No	Date of Birth	Is this a puppy?
<input type="checkbox"/> CKC ERN No.	D _____ M _____	Yes _____
<input type="checkbox"/> CKC Misc. Cert	Y _____	No _____
<input type="checkbox"/> Listed	Place of Birth: <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breed(s) _____

Sire _____

Dam _____

Registered Owner(s) _____

Owner's Address _____

Prov _____ Postal Code _____

City _____

Name of Owner's Agent (if any) at the show _____

Agent's Address _____

City _____ Prov _____ Postal Code _____

Mail I.D. to: Owner or Agent

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. In addition, 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 or misfortune however caused.

Signature of Owner or Agent _____

Phone Number _____

Please provide email address for online entry confirmation. _____



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Prov _____ Postal Code _____

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