

OFFICIAL CANADIAN KENNEL CLUB FORM

Boxer Club of Western Ontario

Saturday, July 6, 2019

CLOSING DATE: 8 p.m. Monday, June 24, 2019 Make fees payable to SARNIA KENNEL CLUB and mail to: MJN Show Services 9 Samya Court Scarborough, ON M1R 2A4 Breed	Please	type or print	clearly Var	Entry Fees (\$\\$\text{Baby Puppy C} \\ Non-Regular (\$\text{Listing Fees (\$\text{Exhibition Onl} \\ Catalogue (\$\text{6} \\ TOTAL enclose) \\ iety	Classes (\$10 Classes (\$11 \$11.30 per s y (\$12.00) .00 each)	2.00) \$
Enter in the following Classe	 es:					
☐ Junior Puppy ☐ Senior Puppy ☐ 12 - 18 Month ☐ Canadian Bred ☐ Bred by Exhibitor Reg. Name of Dog	Open Veterans Veterans 7 - Veterans 9 - Veterans 11 N	11 Yrs. 📮	Specia Baby F Brace Stud D Brood	og	□ Ex	chibition Only
Check One – and – Enter Number here			Date of Birth			Is this a puppy?
CKC Reg. No. CKC ERN No. CKC Misc. Cert. No. Listed			D M Y YE Place of Birth Canada			·
Breeder(s)						
Sire						
Dam						
Reg'd Owner(s)						
Owner's Address						
City				Code		
Name of Owner's Agent (if a at the Show	ny)					
Agent's Address						
ity		Prov.		Code		
Mail I.D. to □ Owner or □	Agent Email					
FAX/CREDIT CARD ENTRIE						Expiry
lame of CardholderSignature						

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.