

**OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM
CLUB CANIN DU BAS-SAINT LAURENT**



All Breeds

- Friday July 12 #1 PM
- Saturday July 13 #2
- Saturday July 13 #3
- Sunday July 14 #4
- Sunday July 14 #5

MAIL TO :
Pascale Pontois
1890 Rg des Chutes
Ste Ursule, Qc J0K 3M0

Catalog \$8.00 pre-ordered only

Entries close: July 2, 9:00pm

BREED	VARIETY	SEX
CONFORMATION <input type="checkbox"/> Bred by Exhibitor <input type="checkbox"/> Veteran Class <input type="checkbox"/> Junior Puppy <input type="checkbox"/> Open <input type="checkbox"/> Sexually Altered Class <input type="checkbox"/> Senior Puppy <input type="checkbox"/> Special Only <input type="checkbox"/> 12-18 Months <input type="checkbox"/> Baby Puppy <input type="checkbox"/> Canadian Bred <input type="checkbox"/> Exhibition Only		
REG. NAME OF DOG		
CHECK ONE <input type="checkbox"/> CKC REG. NO <input type="checkbox"/> CKC ERN NO <input type="checkbox"/> CKC MISC. CERT. NO <input type="checkbox"/> LISTED	ENTER NUMBER HERE _____	DATE OF BIRTH D M Y
		PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE
BREEDER(S)		
SIRE		
DAM		
REG'D OWNER(S)		
OWNER'S ADDRESS		
CITY	PROV	PC
NAME OF OWNER'S AGENT		
AGENT'S ADDRESS		
CITY	PROV	PC
MAIL I.D. TO <input type="checkbox"/> OWNER OR <input type="checkbox"/> AGENT		
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD Verifi Number Rear _____ CARD # _____ EXPIRY ____/____ CARD HOLDER NAME _____		

I 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.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.