

OFFICE USE	OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM <b>Elsie Murray Canine Center Society</b> <b>NOVEMBER 4 &amp; 5, 2016</b>	OFFICE USE	
I enclose \$ _____ Entry Fees \$ _____ Listing Fees \$ _____ <b>Friday Nov.4, 2016 ____ / Saturday Nov.5,2016 ____</b>			
<b>BREED</b>		<b>VARIETY</b>	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
<input type="checkbox"/> Junior Puppy <input type="checkbox"/> Bred By Exhibitor <input type="checkbox"/> Prepaid Catalogue <input type="checkbox"/> Senior Puppy <input type="checkbox"/> Open <input type="checkbox"/> 12-18 Months <input type="checkbox"/> Specials Only <input type="checkbox"/> Canadian Bred <input type="checkbox"/> Exhibition Only			
<b>REG. NAME OF DOG</b>			
CHECK ONE – AND - ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO.		<b>DATE OF BIRTH</b> _____ / _____ / _____ Month      Day      Year	<b>ON SHOW DATE IS THIS A PUPPY?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
NUMBER: _____		<b>PLACE OF BIRTH</b> <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
<b><u>IDs will not be mailed – please supply email address below for entry confirmation</u></b>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS			
CARD NO. _____		EXPIRY _____ / _____	
CARDHOLDER NAME (PLEASE PRINT) _____			
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.			
SIGNATURE OF OWNER OR AGENT _____		Telephone number _____	
<b>E-MAIL:</b>			

OFFICE USE	OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM <b>LADIES' KENNEL CLUB OF B.C.</b> <b>NOVEMBER 6 &amp; 7, 2016</b>	OFFICE USE	
I enclose \$ _____ Entry Fees \$ _____ Listing Fees \$ _____ <b>Sunday Nov. 6, 2016 ____ /Monday Nov. 7,2016 ____</b>			
<b>BREED</b>		<b>VARIETY</b>	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
<input type="checkbox"/> Junior Puppy <input type="checkbox"/> Specials Only <input type="checkbox"/> Prepaid Catalogue <input type="checkbox"/> Senior Puppy <input type="checkbox"/> Exhibition Only <input type="checkbox"/> 12-18 Months <input type="checkbox"/> Canadian Bred <input type="checkbox"/> Bred By Exhibitor <input type="checkbox"/> Open			
<b>REG. NAME OF DOG</b>			
CHECK ONE – AND - ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO.		<b>DATE OF BIRTH</b> _____ / _____ / _____ Month      Day      Year	<b>ON SHOW DATE IS THIS A PUPPY?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
NUMBER: _____		<b>PLACE OF BIRTH</b> <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
<b><u>IDs will not be mailed – please supply email address below for entry confirmation</u></b>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS			
CARD NO. _____		EXPIRY _____ / _____	
CARDHOLDER NAME (PLEASE PRINT) _____			
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.			
SIGNATURE OF OWNER OR AGENT _____		Telephone number _____	
<b>E-MAIL:</b>			

OFFICE USE	OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM <b>Elsie Murray Canine Center Society</b> <b>Obedience Trials</b> <b>November 5 &amp; 6, 2016</b>	OFFICE USE
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I enclose \$ \_\_\_\_\_ Entry Fees \$ \_\_\_\_\_ Listing Fees \$ \_\_\_\_\_

**Saturday Sept. 10,2016** \_\_\_\_ / **Sunday Sept. 11,2016** \_\_\_\_

**A SEPARATE ENTRY FORM MUST BE USED WHEN A DOG IS ENTERED IN 2 CLASSES**

<b>BREED</b>	<b>VARIETY</b>	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
<input type="checkbox"/> PreNovice <input type="checkbox"/> Utility A                                       JUMPS   <input type="checkbox"/> Novice A <input type="checkbox"/> Utility B                                      Height _____ <input type="checkbox"/> Novice B    Width _____ <input type="checkbox"/> Novice C <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Novice Intermediate <input type="checkbox"/> Open A <input type="checkbox"/> Open B    _____ <i>Prepaid Catalogue</i>		

<b>REG. NAME OF DOG</b>		
CHECK ONE – AND - ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> CCN <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> LISTED	<b>DATE OF BIRTH</b> _____ / _____ / _____ Month      Day      Year	<b>ON SHOW DATE IS THIS A PUPPY?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<b>NUMBER:</b>	<b>PLACE OF BIRTH</b>	
	<input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE	

**BREEDER(S)**

**SIRE**

**DAM**

**REG'D OWNER(S)**

**OWNER'S ADDRESS**

<b>CITY</b>	<b>PROV./STATE</b>	<b>POSTAL CODE</b>
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**NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW**

**AGENT'S ADDRESS**

<b>CITY</b>	<b>PROV./STATE</b>	<b>POSTAL CODE</b>
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**IDs will not be mailed – please supply email address below for entry confirmation**

VISA     MASTERCARD     AMERICAN EXPRESS

**CARD NO.** \_\_\_\_\_ **EXPIRY** \_\_\_\_/\_\_\_\_

**CARDHOLDER NAME (PLEASE PRINT)** \_\_\_\_\_

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.

\_\_\_\_\_  
**SIGNATURE OF OWNER OR AGENT**                                      **Telephone number**

**E-MAIL:**  
 \_\_\_\_\_