



OFFICIAL CANADIAN KENNEL CLUB FORM

**SPECIALTY CONFORMATION**

**OAKVILLE & DISTRICT KENNEL CLUB**

- Boxer Club of Canada (Regional) - Sat. Sept 8
- Black Russian Terrier Club of Canada (National) - Sat. Sept 8

Entry Fees (\$32.00) \$ \_\_\_\_\_  
 Listing Fees (\$11.30) \$ \_\_\_\_\_  
 Exhibition Only (\$7.00) \$ \_\_\_\_\_  
 Baby Puppy (\$10.00) \$ \_\_\_\_\_  
 Non-Regular (\$10.00) \$ \_\_\_\_\_  
 Sweepstakes (\$10.00 each) \$ \_\_\_\_\_  
 Catalogue (\$7.00 each) \$ \_\_\_\_\_  
 TOTAL enclosed \$ \_\_\_\_\_

CLOSING DATE: 8 p.m.  
 WED., AUG. 22, 2018  
 Make fees payable to  
 Oakville & District Kennel Club  
 and mail to:  
 MJN Show Services  
 9 Samya Court  
 Scarborough ON M1R 2A4

*Please type or print clearly*

Breed	Variety	Sex
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Enter in the following Classes: **Consult individual specialties for classes offered**

- |  |  |  |                                      |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> Junior Puppy      | <input type="checkbox"/> Open          | <input type="checkbox"/> Brood Bitch         | <input type="checkbox"/> Sweepstakes |
| <input type="checkbox"/> Senior Puppy      | <input type="checkbox"/> Veterans      | <input type="checkbox"/> Exhibition Only     | Class _____                          |
| <input type="checkbox"/> 12 - 18 Month     | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Veteran Sweepstakes | Class _____                          |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Baby Puppy    |  |                                      |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Stud Dog      |  |                                      |

Reg. Name of Dog \_\_\_\_\_

Check One – and – Enter Number here  <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> Listed	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
		Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner's Address \_\_\_\_\_

City	Prov.	Code
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Name of Owner's Agent (if any) at the Show \_\_\_\_\_

Agent's Address \_\_\_\_\_

City	Prov.	Code
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Mail I.D. to  Owner or  Agent Email \_\_\_\_\_

**FAX/CREDIT CARD ENTRIES**

Amer Express  Mastercard  VISA Card No. \_\_\_\_\_ Expiry \_\_\_\_\_

Name of Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

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.

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_