

	Official Canadian Kennel Club Entry Form <b>GOLDEN RETRIEVER CLUB OF CANADA SPONSORED</b> <b>ATLANTIC REGIONAL SPECIALTY</b> 12TH NOVEMBER 2016 HELD AT MONCTON, NEW BRUNSWICK	Administrative use only

Regular Class Entry ..... x \$28.00	Non-Regular Class Entry ..... x \$15.00
Baby Puppy per show ..... x \$15.00	Puppy and/or Veteran Sweeps ..... x \$15.00
Listing Fee per show ..... x \$ 9.80	Exhibition Only per show ..... x \$ 5.00
Specialty Catalogue ..... \$ 5.00	Advertising \$ _____ TOTAL ENCL \$ _____

Please Print or type CLEARLY

Enter in one only of the following classes

<input type="checkbox"/> 3-6 month (Baby Puppy)	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Specials
<input type="checkbox"/> Jr Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Sr Puppy	<input type="checkbox"/> Altered	<b>NON-REGULAR CLASSES</b>
<input type="checkbox"/> 12-18 month	<input type="checkbox"/> Veteran	<input type="checkbox"/> Stud Dog & Get
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Field Dog	<input type="checkbox"/> Brood Bitch & Progeny <input type="checkbox"/> Brace Class

BREED	VARIETY	SEX
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NAME OF DOG

Check one & enter Reg # here <input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # <input type="checkbox"/> Listed	Date Of Birth _____ Day    Month    Year	Is this a puppy? YES ___ NO ___
	Place Of Birth ___ Canada ___ Elsewhere	

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
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Mail ID to: \_\_\_ OWNER or \_\_\_ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner \_\_\_\_\_ Phone Number \_\_\_\_\_

Email: \_\_\_\_\_

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