



**OFFICIAL CANADIAN KENNEL CLUB FORM  
THOUSAND ISLANDS KENNEL & OBEDIENCE CLUB  
Mail to: Diana Edwards Show Services  
1562 Route 203, Howick, QC J0S 1G0**

**Specialty Show:**

|           |                |                  |             |
|-----------|----------------|------------------|-------------|
| Total: \$ | Entry Fees: \$ | Listing Fees: \$ | Catalog: \$ |
| Breed     |                | Variety          | Sex         |

Enter in the following classes:

- |  |   |
|--|---|
| <input type="checkbox"/> Baby Puppy        | <input type="checkbox"/> Specials Only  |
| <input type="checkbox"/> Junior Puppy      | <input type="checkbox"/> Stud Dog       |
| <input type="checkbox"/> Senior Puppy      | <input type="checkbox"/> Brood Bitch    |
| <input type="checkbox"/> 12-18 Months      | <input type="checkbox"/> Brace          |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Altered        |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Cut Down Class |
| <input type="checkbox"/> Open              |   |
| <input type="checkbox"/> Veterans          |   |

- |   |   |
|---|---|
| <input type="checkbox"/> Sweeps 3-6                               | <input type="checkbox"/> Vet.Sweeps 7-9 yrs   |
| <input type="checkbox"/> Sweeps 6-9                               | <input type="checkbox"/> Vet.Sweeps 9+ yrs    |
| <input type="checkbox"/> Sweeps 9-12                              | <input type="checkbox"/> Vet.Sweeps 10-12 yrs |
| <input type="checkbox"/> Sweeps 12-18                             | <input type="checkbox"/> Vet.Sweeps 13+ yrs   |
| <input type="checkbox"/> Altered Sweeps – Under 12 mths           |   |
| <input type="checkbox"/> Altered Sweeps – 1-7 yrs                 |   |
| <input type="checkbox"/> Altered Sweeps – 7 yrs & over            |   |
| <input type="checkbox"/> Specialty Rally: Class _____ Jump: _____ |   |
| <input type="checkbox"/> Specialty Obed: Class _____ Jump: _____  |   |

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"/> CKC PEN No.           |
| <input type="checkbox"/> CKC CCN No.           |
| <input type="checkbox"/> Listed (no C.K.C.No.) |

Date of Birth  
D \_\_\_\_ M \_\_\_\_ Y \_\_\_\_

Is this a Puppy?  
 YES  NO

Place of Birth  
Canada      Elsewhere

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

Sire \_\_\_\_\_

Dam \_\_\_\_\_

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

Owner(s) Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Name of Owner's Agent (if any) at the Show \_\_\_\_\_

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

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Mail I.D. to:

- Owner  
 Agent

\_\_\_\_\_  
SIGNATURE OF OWNER OR AGENT

\_\_\_\_\_  
TELEPHONE NUMBER

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.

EMAIL: \_\_\_\_\_

**FAX SERVICES - VISA / MASTERCARD / AMEX - (450) 825-0894**

Card number: \_\_\_\_\_ Expiry date \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_ **Security Code** \_\_\_\_\_