

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM **Trillium Dog Fanciers (Specialty Entry Form)** Mail to: Diana Edwards Show Services 1562 Route 203, Howick, QC J0S 1G0

Specialty Entry:

Name of Specialty Club

I ENCLOSE \$	FOR TOTAL ENTRY FEE	S		
Breed		Variety	Sex	
Enter in the following classe Baby Puppy Open Junior Puppy Veter Senior Puppy Spec 12-18 Months Exhib Canadian Bred Bred by Exhibitor	Stud DogansBrood Bitchals OnlyBrace		5-9 9-12	
Reg.Name of Dog				
Check One and Enter Numl C.K.C.Reg.No. C.K.C.ERN No.	ber Here	Date of Birth DMY_		
C.K.C.Misc.Cert.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 a	any) at the Show)			
Agent's Address				
City		Prov.	Postal Code	
Mail / email I.D.to Owner. Agent I certify that I am the registered have entered above and accept of this entry. I(we) agree to be b rules and regulations appearing	SIGNATURE OF OWN owner(s) of the dog or that I am full responsibility for all stateme ound by the rules and regulatio in the premium list.	ER OR AGENT the authorized agent of the ents made in this entry. In c ns of the Canadian Kennel (TELEPHONE NO. owner(s) whose name(s) I onsideration of the acceptance Club and by any additional	
Email:				
FAX, EMA	NIL SERVICES - VISA / Ma	stercard / Amex (450)	825-0894	
Card number:		Expiry date		
Name of Card Holder:		Security <u>#</u>	<u> </u>	