



CANADIAN KENNEL CLUB

OFFICIAL ENTRY FORM

(Scent Detection)

Name of Club: _____

EVENT INFORMATION

FEES: Entry Fee \$ _____ TCN \$ _____ Total Enclosed \$ _____

Date of Test(s): _____

DOG INFORMATION

Registered Name of Dog: _____

Breed: _____ Call Name: _____

Class: Instinct Novice Open Excellent Master
 Component: Container Interior Exterior

CKC Registration # CKC Miscellaneous #
 CKC ERN # TCN
 CKC PEN # CCN

Insert Number Here: _____

Date of Birth: dd mm yy Place of Birth: Canada Elsewhere

Breeder: _____

Sire: _____

Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s): _____ Membership No. _____
 _____ Membership No. _____
 _____ Membership No. _____

Owner's Address: _____

Name of Agent (if any): _____

Agent's Address: _____
Street Address City Prov Postal Code

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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 Email



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