



OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM OBEDIENCE CRANBROOK & DISTRICT KENNEL CLUB September 28 – September 29, 2019	OFFICE USE	
OBEDIENCE TRIALS		Entry fee _____	
<input type="checkbox"/> Saturday #1 <input type="checkbox"/> Sunday #3 <input type="checkbox"/> Saturday #2 <input type="checkbox"/> Sunday #4		Listing fee _____ Catalogue _____ TOTAL _____	
PLEASE TYPE OR PRINT CLEARLY		PREPAID CATALOGUE	
BREED		VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ENTER IN THE FOLLOWING CLASSES:			
<input type="checkbox"/> PRE-NOVICE <input type="checkbox"/> OPEN HB <input type="checkbox"/> NOVICE A <input type="checkbox"/> OPEN 18A <input type="checkbox"/> NOVICE B <input type="checkbox"/> OPEN 18B <input type="checkbox"/> NOVICE C <input type="checkbox"/> UTILITY A <input type="checkbox"/> NOVICE INTERMEDIATE <input type="checkbox"/> UTILITY B <input type="checkbox"/> OPEN HA <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT		<input type="checkbox"/> GRADUATE NOVICE <input type="checkbox"/> GRADUATE OPEN <input type="checkbox"/> BRACE <input type="checkbox"/> TEAM <input type="checkbox"/> VETERANS <input type="checkbox"/> VERSATILITY <input type="checkbox"/> WILD CARD _____ LEVEL	
REG'D. NAME OF DOG			
CHECK ONE & ENTER NUMBER BELOW:		DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?
<input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC CCN NO.		_____ / _____ / _____ Day Month Year	<input type="checkbox"/> YES <input type="checkbox"/> NO
NUMBER:		PLACE OF BIRTH CANADA _____ ELSEWHERE _____	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)		CKC MEMBERSHIP #	
OWNER'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
<u>IDs will not be mailed – please supply email address below for entry confirmation</u>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS (No credit card payments on paper entries)			
CARD NO. _____			EXPIRY _____ / _____
CARDHOLDER NAME (PLEASE PRINT) _____			
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.			
SIGNATURE OF OWNER OR AGENT _____		TELEPHONE NUMBER: _____	
E-MAIL ADDRESS: _____			

OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM RALLY OBEDIENCE CRANBROOK & DISTRICT KENNEL CLUB September 28 - September 29, 2019	OFFICE USE	
RALLY OBEDIENCE TRIALS		Entry fee _____	
<input type="checkbox"/> Saturday #1 <input type="checkbox"/> Sunday #2		Listing fee _____	
PLEASE TYPE OR PRINT CLEARLY		PREPAID CATALOGUE	
BREED		VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ENTER IN THE FOLLOWING CLASSES:			
<input type="checkbox"/> NOVICE A (RN) <input type="checkbox"/> ADVANCED "B" (RA) <input type="checkbox"/> NOVICE B (RN) <input type="checkbox"/> EXCELLENT "A" (RE) <input type="checkbox"/> INTERMEDIATE (RI) <input type="checkbox"/> EXCELLENT "B" (RE) <input type="checkbox"/> ADVANCED "A" <input type="checkbox"/> MASTER (RM)		<input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT	
REG'D. NAME OF DOG			
CHECK ONE & ENTER NUMBER BELOW:		DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?
<input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC CCN NO.		_____ / _____ / _____ Day Month Year	<input type="checkbox"/> YES <input type="checkbox"/> NO
NUMBER:		PLACE OF BIRTH CANADA _____ ELSEWHERE _____	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)		CKC MEMBERSHIP #	
OWNER'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV./STATE	POSTAL CODE
<u>IDs will not be mailed – please supply email address below for entry confirmation</u>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS (No credit card payments on paper entries)			
CARD NO. _____			EXPIRY _____ / _____
CARDHOLDER NAME (PLEASE PRINT) _____			
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.			
SIGNATURE OF OWNER OR AGENT _____		TELEPHONE NUMBER: _____	
E-MAIL ADDRESS: _____			