
 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">ATLANTIC TERRIER ASSOCIATION</h2> <p>Stan Dunfield, 2793 George Dauphine Ave, Halifax NS B3L 3S5</p>	Administrative use only
<p>Conformation entry fees _____ x \$28.00 = _____</p> <p>Baby Puppy: _____ x \$20.00 = _____</p> <p>Sweepstakes: _____ x \$12.00 = _____</p> <p>Ex. Only: _____ x \$ 8.00 = _____</p> <p>CKC TC Fee _____ x 11.50 = _____</p> <p>Catalog: _____ x \$10.00 = _____</p> <p style="text-align: right;">Total: _____</p> <p>[] Catalog</p>	<p>Conformation entry fees _____ x \$28.00 = _____</p> <p>Baby Puppy: _____ x \$20.00 = _____</p> <p>Sweepstakes: _____ x \$12.00 = _____</p> <p>Ex. Only: _____ x \$ 8.00 = _____</p> <p>CKC TC Fee _____ x 11.50 = _____</p> <p>Catalog: _____ x \$10.00 = _____</p> <p style="text-align: right;">Total: _____</p> <p>[] Catalog</p>
Please Print or type CLEARLY	
Enter in one only of the following classes	SWEEPSTAKES UNOFFICIAL
CONFORMATION	[] Junior Puppy [] Baby Puppy
[] Junior Puppy [] Open	[] Senior Puppy
[] Senior Puppy [] Veterans	[] 12-18 Months
[] 12-18 Month [] Specials Only	[] Veterans 7 to 9
[] Canadian Bred [] Exhibition Only	[] Veterans 10 and over
[] Bred By Exhibitor	
BREED	SEX
NAME OF DOG	
Check one & enter Reg # here	Date Of Birth
____ CKC Reg #	____ / ____ / ____
____ CKC ERN #	Day Month Year
____ CKC MSC #	Is this a puppy? YES ____ NO ____
____ CKC TCN	Place Of Birth ____ Canada ____ Elsewhere
BREEDER	
SIRE	
DAM	
REG. OWNER	
OWNER ADDRESS	
CITY	PROV POST CODE
AGENT NAME	
AGENT ADDRESS	
CITY	PROV POST CODE
E-Mail ID to: ____ OWNER or ____ AGENT	
Email: _____	
<p>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.</p>	
Signature of agent or owner	Phone Number
Email: _____	

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DAM	
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CITY	PROV POST CODE
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