

OFFICE USE	OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM <h2 style="text-align:center;">Fort St John & Districts Kennel Club</h2> <p style="text-align:center;">May 20,21 & 22 ,2017</p>	OFFICE USE
I enclose \$_____ Entry Fees \$_____ Listing Fees \$_____ <i>Prepaid Catalogue</i> \$_____		
Show 1 Show 2 Show 3 Show 4 Show 5 Show 6		
BREED		VARIETY _____ <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Specials Only
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Baby Puppy
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only (3-6)m
<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Veterans
<input type="checkbox"/> Open	<input type="checkbox"/> Brace

REG. NAME OF DOG		
CHECK ONE - AND - ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> CKC PEN NO.	DATE OF BIRTH _____ / _____ / _____ Month Day Year	ON SHOW DATE IS THIS A PUPPY? <input type="checkbox"/> YES <input type="checkbox"/> NO
NUMBER: _____	PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE	

BREEDER(S)		
SIRE		
DAM		
REG'D OWNER(S)		
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

IDs will not be mailed – please supply email address below for entry confirmation

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
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: _____	

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