



OFFICIAL ENTRY FORM (Specialty Conformation Show)

**Maritime Golden Retriever Club
32nd MGRC Specialty
Saturday, September 7, 2019**



EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____
Catalogue \$ _____ Total Enclosed \$ _____

CLASSES ENTERED

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Veterans Class | <input type="checkbox"/> Stud Dog |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Field Class | <input type="checkbox"/> Brood Bitch |
| <input type="checkbox"/> 12-18 Month | <input type="checkbox"/> Specials Only | <input type="checkbox"/> |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Exhibition Only | <input type="checkbox"/> Altered |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Baby Puppy Class | <input type="checkbox"/> Sweeps Class |
| <input type="checkbox"/> Open Class | <input type="checkbox"/> Brace | |

DOG INFORMATION

Registered Name of Dog: _____

Breed: _____ Variety: _____ Male Female

CKC Registration # CKC Miscellaneous #
 CKC ERN # Listed **Insert Number Here:** _____

Date of Birth dd mm yy Place of Birth: Canada Elsewhere Puppy: Yes No

Breeder: _____
Sire: _____
Dam: _____

OWNER(S) & AGENT INFORMATION

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

Owner's Address: _____
Name of Agent/Handler: _____
Agent's Address: _____
Street Address City Prov. Postal Code

Mail To: Owner Agent

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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