



CONFORMATION



Newfoundland Dog Club of Canada

Saturday, August 31, 2019
Sweepstakes: August 31, 2019

Mail or email to: Diana Edwards Show Services
1562 Route 203 Howick,
QC J0S 1G0
diana@dess.ca

Entry Fees: \$
Listing Fees: \$
TOTAL: \$

Breed: NEWFOUNDLAND [] Male [] Female
[] Baby Puppy [] Open Black SWEEPSTAKES - JUVENILE
[] 6 - 9 Month [] Open Landseer [] 3 - 6 mo [] 6 - 9 mo
[] 9 - 12 Month [] Veterans 7 plus [] 9 - 12 mo [] 12 - 18 mo
[] 12 - 18 Month [] Specials Only
[] Canadian Bred SWEEPSTAKES - VETERANS
[] Bred by Exhibitor [] 7 plus
[] Exhibition Only

Registered Name of Dog

Date of Birth: D M Y Place of Birth: [] Canada [] Elsewhere Puppy: [] Yes [] No
Check One and Enter Number [] CKC Registration# [] CKC PEN [] CKC ERN #
Enter number here

Breeder(s)
Sire
Dam
Reg'd Owner(s)
City Prov/State Postal Code
E-mail
Name of Agent/Handler
Agent's Address
City Prov/State Postal Code
Mail I.D. to: [] Owner [] Agent

FAX/CREDIT CARD - DIANA EDWARDS SHOW SERVICES (450) 825-0894 Security No.
[] Am. Express [] Mastercard [] VISA Card No. Exp.
Name of Card Holder Signature

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



OBEDIENCE



Newfoundland Dog Club of Canada

Thursday August 29, 2019

Mail or email to: Diana Edwards Show Services
1562 Route 203 Howick,
QC J0S 1G0
diana@dess.ca

Entry Fees: \$
Listing Fees: \$
TOTAL: \$

Breed: NEWFOUNDLAND [] Male [] Female
Obedience Classes:
[] Pre-Novice [] Utility A
[] Novice A [] Utility B
[] Novice B [] Veteran
[] Novice C
[] Novice Intermediate [] Exhibition Only
[] Open A
[] Open B Jumps-Ht.
-Wd.

Registered Name of Dog

Date of Birth: D M Y Place of Birth: [] Canada [] Elsewhere Puppy: [] Yes [] No
Check One and Enter Number [] CKC Registration# [] CKC PEN [] CKC ERN #
Enter number here

Breeder(s)
Sire
Dam
Reg'd Owner(s)
Owner's Address
City Prov/State Postal Code
E-mail
Name of Agent/Handler
Agent's Address
City Prov/State Postal Code
Mail I.D. to: [] Owner [] Agent

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