	<b>Official Canadian Kennel Club Entry Form</b> <b>COBEQUID DOG CLUB</b>	Administrative use only
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<input type="checkbox"/> Show 1	Baby Puppy Fee	___ x \$15.00 = _____			
<input type="checkbox"/> Show 2	Entry fees:	___ x \$30.00 = _____			
<input type="checkbox"/> Show 3	TCN Fees:	___ x \$11.50= _____			
<input type="checkbox"/> Show 4	Ex. Only:	___ x \$10.00 = _____			
<input type="checkbox"/> Catalog	Catalog:	___ x \$10.00 = _____			
	Total:	_____			

Please Print or type CLEARLY

**Enter in one only of the following classes**

**CONFORMATION**

<input type="checkbox"/> Baby Puppy	<input type="checkbox"/> Bred By Exhibitor
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Open
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only
<input type="checkbox"/> 12-18 Month	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Canadian Bred	

<b>BREED</b>	<b>VARIETY</b>	<b>SEX</b>
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**NAME OF DOG**

<b>Check one &amp; enter Reg # here</b> <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed	<b>Date Of Birth</b> _____ Day    Month    Year	<b>Is this a puppy?</b> YES ___ NO ___  <b>Place Of Birth</b> ___ Canada ___ Elsewhere
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**BREEDER**

**SIRE**

**DAM**

**REG. OWNER**

**REG. OWNER**

**OWNER ADDRESS**

<b>CITY</b>	<b>PROV</b>	<b>POST CODE</b>
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**AGENT NAME**


**AGENT ADDRESS**

<b>CITY</b>	<b>PROV</b>	<b>POST CODE</b>
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Mail ID to: \_\_\_ OWNER or \_\_\_ AGENT

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 Kennel Club 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.

\_\_\_\_\_  
 Signature of agent or owner                      Phone Number                      Email

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**SIRE**

**DAM**

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