

Office Use Only



### Official Entry Form Limited Entry



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#### ALL BREED OBEDIENCE

Saturday, July 22, 2016 Trial #1 AM [ ] Trial #2 PM [ ]  
Sunday, July 23, 2016 Trial #3 AM [ ] Trial #4 PM [ ]

#### ALL BREED RALLY

Saturday, July 22, 2016 Trial #1 AM [ ] Trial #2 PM [ ]  
Sunday, July 23, 2016 Trial #3 AM [ ] Trial #4 PM [ ]

**ENTRIES CLOSE: WEDNESDAY, July 5th, 2017 @ 9:00pm Pacific Time**  
Day of Entry allowed if limits have not been reached.

Cheques made payable to Sporting Dog Spectacular  
Mail to Classic Show Services #109-30989 Westridge Place Abbotsford, B.C. V2T 0E7 (804)-845-9510  
Online and fax entry information at [www.dogshow.ca](http://www.dogshow.ca)

Entry Fee \$ \_\_\_\_\_ Listing Fee \$ \_\_\_\_\_  
Catalog \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

<input type="checkbox"/> OBEDIENCE - Pre-Novice	<input type="checkbox"/> OBEDIENCE - Novice Intermediate	<input type="checkbox"/> OBEDIENCE - Utility B	<input type="checkbox"/> RALLY - Novice A	<input type="checkbox"/> RALLY - Advanced B
<input type="checkbox"/> OBEDIENCE - Novice A	<input type="checkbox"/> OBEDIENCE - Open A	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> RALLY - Novice B	<input type="checkbox"/> RALLY - Excellent A
<input type="checkbox"/> OBEDIENCE - Novice B	<input type="checkbox"/> OBEDIENCE - Open B		<input type="checkbox"/> RALLY - Intermediate	<input type="checkbox"/> RALLY - Excellent B
<input type="checkbox"/> OBEDIENCE - Novice C	<input type="checkbox"/> OBEDIENCE - Utility A	_____ Jump Height	<input type="checkbox"/> RALLY - Advanced A	

#### DOG INFORMATION \*\*\*please print clearly\*\*\*

Breed \_\_\_\_\_ Variety \_\_\_\_\_  Male  Female

Reg'd Name of Dog \_\_\_\_\_

CKC Reg #  CKC Misc. #  CKC ERN #  LISTED  CANINE COMPANION #

Date Of Birth \_\_\_\_\_ Place of Birth:  Canada  Elsewhere  Yes  No

Breeder(s) \_\_\_\_\_

Sire \_\_\_\_\_

Dam \_\_\_\_\_

#### OWNER / AGENT INFORMATION

Reg'd Owner(s) \_\_\_\_\_ Membership # \_\_\_\_\_

Agent \_\_\_\_\_

Owner's Address \_\_\_\_\_ Postal Code \_\_\_\_\_

VISA  Mastercard  American Express A service charge of 10% will be assessed.

Credit Card # \_\_\_\_\_ Exp.Date \_\_\_\_\_ Name of Cardholder \_\_\_\_\_

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 the consideration of the acceptance of this entry, I 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/Agent \_\_\_\_\_ Ph.# ( ) \_\_\_\_\_

Email Address (required) \_\_\_\_\_