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| Office Use | Official Canadian Kennel Club Entry Form | | Office Use |
|  | Rocky Mountain Working Herding Club of Alberta | |  |
| | Group 3 & 7 Specialties | | |
| | Saturday, October 10 <input type="checkbox"/> | | |
| | Sunday, October 11 <input type="checkbox"/> | | |
| <small>Entry Fees</small> | <small>TCN Fees</small> | <small>Miscellaneous</small> | <small>Total</small> |
| <small>PLEASE TYPE OR PRINT CLEARLY</small> | | | |
| <small>Breed</small> | <small>Variety</small> | <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| <small>ENTER IN THE FOLLOWING CLASSES</small> | | | |
| CONFORMATION | | | |
| <input type="checkbox"/> JUNIOR PUPPY <input type="checkbox"/> SENIOR PUPPY <input type="checkbox"/> 12 - 15 MONTH <input type="checkbox"/> 15 - 18 MONTH <input type="checkbox"/> CANADIAN BRED <input type="checkbox"/> BRED BY EXHIBITOR <input type="checkbox"/> OPEN <input type="checkbox"/> VETERAN <input type="checkbox"/> SPECIALS ONLY | | <input type="checkbox"/> BABY PUPPY <input type="checkbox"/> EXHIBITION <input type="checkbox"/> EXHIBITION (3 - 6 MONTH) <input type="checkbox"/> PREPAID CATALOGUE | |
| <small>REGISTERED NAME OF DOG</small> | | | |
| Check One | | Date of Birth | Place of Birth |
| <input type="checkbox"/> CKC Registration # <input type="checkbox"/> CKC MCN # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC TCN # | | DD / MM / YY | <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere |
| <small>Number</small> | | Is this a Puppy? | |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| <small>Breeder(s)</small> | | | |
| <small>Sire</small> | | | |
| <small>Dam</small> | | | |
| <small>Registered Owner(s)</small> | | | |
| <small>Owner Address</small> | | | |
| <small>City, Prov/State, Postal/Zip Code</small> | | | |
| <small>Agent/Handler (if any)</small> | | | |
| <small>Agent/Handler Address</small> | | | |
| <small>City, Prov/State, Postal/Zip Code</small> | | | |
| 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 | | | |
| <small>Card Number</small> | | <small>Expiry Date</small> MM / YY | |
| <small>Card Holder Name (please print)</small> | | | |
| 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. | | | |
| <small>Signature of Owner or Agent</small> | | | |
| <small>Email</small> | | <small>Telephone</small> | |