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| OFFICE USE |  | OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM |  | OFFICE USE |
| Alberta Kennel Club Urban Tracking Test September 27 th , 2014 | | | | |
| ALL ENTRIES MUST BE SUBMITTED BY MAIL | NO FAX, COURIER OR EMAIL ENTRIES ACCEPTED | LIMITED ENTRIES | | |
| ENTRY FEES \$ _____ | LISTING FEES \$ _____ | TOTAL \$ _____ | | |
| <i>PLEASE TYPE OR PRINT CLEARLY</i> | | | | |
| BREED _____ | | | ___ MALE ___ FEMALE | |
| CLASS ENTERED (choose one): | | | | |
| _____ UTD | _____ UTDX | Dog's Call Name _____ | | |
| REG. NAME OF DOG _____ | | | | |
| CHECK ONE AND ENTER NUMBER HERE | | DATE OF BIRTH | | |
| ___ CKC REG. NO. ___ CKC MISC. CERT. NO. | ___ CKC ERN NO. ___ LISTED | ___ / ___ / ___ Day Month Year | | |
| NUMBER: _____ | | PLACE OF BIRTH ___ CANADA ___ ELSEWHERE | | |
| BREEDER(S) SIRE _____ | | | | |
| DAM _____ | | | | |
| REG'D OWNER(S) _____ | | | | |
| OWNER'S ADDRESS | | | | |
| CITY _____ | | PROV./STATE _____ | POSTAL CODE _____ | |
| NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW _____ | | | | |
| AGENT'S ADDRESS | | | | |
| CITY _____ | | PROV./STATE _____ | POSTAL CODE _____ | |
| MAIL ID TO: _____ | | ___ OWNER | ___ AGENT | |
| 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. | | | | |
| SIGNATURE OF OWNER OR AGENT _____ | | | TELEPHONE NUMBER _____ | |
| E-MAIL ADDRESS: _____ | | | | |

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