

OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM CONFORMATION	OFFICE USE	LLOYDMINSTER KENNEL & OBEDIENCE CLUB September 27th - September 29th, 2024
CONFORMATION			
___ Friday #1		___ Friday #2	
___ Saturday #1		___ Saturday #2	
___ Sunday #1		___ Sunday #2	
		___ Entry Fee	
		___ TCN Fee	
		___ Total	
<i>PLEASE TYPE OR PRINT CLEARLY</i>			
BREED		VARIETY	___ MALE ___ FEMALE
ENTER IN THE FOLLOWING CLASSES:			
___ JUNIOR PUPPY	___ CANADIAN BRED	___ EXHIBITION ONLY	
___ SENIOR PUPPY	___ BRED BY EXHIBITOR	___ EXHIBITION ONLY (4-6 Months)	
___ 12 - 18 MONTH	___ OPEN	___ BENCHING	
	___ SPECIALS ONLY		
REG'D NAME OF DOG			
CKC REGISTRATION NUMBER		DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?
		___ / ___ / ___ Day Month Year	___ YES ___ NO
NUMBER		PLACE OF BIRTH	
		CANADA ELSEWHERE	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			
CITY		PROV / STATE	POSTAL / ZIP CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV / STATE	POSTAL / ZIP CODE
<i>IDs will not be mailed – please supply email address below for entry confirmation</i>			
___ VISA ___ MASTERCARD ___ AMERICAN EXPRESS			
CARD NO. _____		EXPIRY ___ / ___	
CARDHOLDER NAME (PLEASE PRINT) _____			
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 _____			
E-MAIL ADDRESS: _____		TELEPHONE NUMBER _____	

OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM OBEDIENCE & RALLY OBEDIENCE	OFFICE USE	LLOYDMINSTER KENNEL & OBEDIENCE CLUB September 28th & September 29th, 2024
OBEDIENCE		RALLY OBEDIENCE	
___ Saturday #1		___ Saturday #1	
___ Saturday #2		___ Saturday #2	
___ Sunday #1		___ Sunday #1	
___ Sunday #2		___ Sunday #2	
		___ Entry Fee	
		___ TCN Fee	
		___ Total	
BREED		VARIETY	___ MALE ___ FEMALE
ENTER IN THE FOLLOWING CLASSES:			
OBEDIENCE		RALLY OBEDIENCE	
___ PRE-NOVICE	___ OPEN HB	___ EXCELLENT A	
___ NOVICE A	___ OPEN 18B	___ EXCELLENT B	
___ NOVICE B	___ UTILITY A	___ MASTER	
___ NOVICE C	___ UTILITY B	___ INTERMEDIATE	
___ NOVICE INTER.	___ EXHIBITION ONLY	___ ADVANCED A	
___ OPEN HA	___ JUMP HEIGHT	___ EXHIBITION ONLY	
___ OPEN 18A		___ ADVANCED B	
		___ JUMP HEIGHT	
REG'D NAME OF DOG			
CKC REGISTRATION NUMBER		DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?
		___ / ___ / ___ Day Month Year	___ YES ___ NO
NUMBER		PLACE OF BIRTH	
		CANADA ELSEWHERE	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)			
OWNER'S ADDRESS			
CITY		PROV / STATE	POSTAL / ZIP CODE
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW			
AGENT'S ADDRESS			
CITY		PROV / STATE	POSTAL / ZIP CODE
<i>IDs will not be mailed – please supply email address below for entry confirmation</i>			
___ VISA ___ MASTERCARD ___ AMERICAN EXPRESS			
CARD NO. _____		EXPIRY ___ / ___	
CARDHOLDER NAME (PLEASE PRINT) _____			
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 _____			
E-MAIL ADDRESS: _____		TELEPHONE NO: _____	

