



COMPETITIVE SERVICE DOG CLUB OF ALBERTA

All Breed Licensed Tracking Trial
Saturday September 29, 2012
Please type or print clearly

Breed _____ Variety _____ Sex _____

- Tracking Trial (T.D.) Trial 1

- Tracking Trial (T.D.X) Trial 1

Registered Name of Dog _____

Check one and enter number here

- CKC Reg. No. | Date of Birth | Is this a puppy?
- CKC ERN NO | D ___ M ___ Y ___ | YES ___ NO ___
- CKC Misc Cert No | Place of birth
- Listed | Canada ___ Elsewhere ___

Breeder (s) _____

Sire _____

Dam _____

Reg'd Owner (s) _____

Owner (s) Address _____

City _____ | Prov/State _____ | Postal Code/Zip Code _____

Name of Owner (s) Agent (if any) at the show _____

Agent's Address _____

City _____ | Prov/State _____ | Postal Code/Zip Code _____

Mail ID to _____ Owner _____ or Agent _____

e-mail address: _____

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 this 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 No. CKC 545 _____



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Breed _____ Variety _____ Sex _____

- Tracking Trial (T.D.) Trial 2

- Tracking Trial (T.D.X) Trial 2

Registered Name of Dog _____

Check one and enter number here | Date of Birth | Is this a puppy?
- CKC Reg. No. | D____M____Y____ | YES____
NO____
- CKC ERN NO
- CKC Misc Cert No | Place of birth
- Listed | Canada____ Elsewhere____

Breeder (s) _____

Sire _____

Dam _____

Reg'd Owner (s) _____

Owner (s) Address _____

City _____ | Prov/State _____ | Postal Code/Zip Code _____

Name of Owner (s) Agent (if any) at the show _____

Agent's Address _____

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Breeder (s) _____

Sire _____

Dam _____

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