

OFFICE USE		<b>OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM</b> <b>OBEDIENCE</b> <b>English Springer Spaniel</b> <b>Club of Canada</b>	OFFICE USE
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_____ <b>Friday Trial</b>	_____ Entry Fee
	_____ Listing Fee
	_____ Prepaid Catalogue
	_____ Total

**PLEASE TYPE OR PRINT CLEARLY**

<b>BREED</b>	<b>VARIETY</b>	<input type="checkbox"/> <b>MALE</b> <input type="checkbox"/> <b>FEMALE</b>
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ENTER IN THE FOLLOWING CLASSES: **OBEDIENCE**

<input type="checkbox"/> PRE NOVICE <input type="checkbox"/> NOVICE A <input type="checkbox"/> NOVICE B <input type="checkbox"/> NOVICE C <input type="checkbox"/> NOVICE INTERMEDIATE <input type="checkbox"/> OPEN A <input type="checkbox"/> OPEN B	<input type="checkbox"/> UTILITY A <input type="checkbox"/> UTILITY B  <input type="checkbox"/> EXHIBITION ONLY  JUMP HEIGHT _____	<input type="checkbox"/> VETERANS <input type="checkbox"/> BRACE
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**REG'D. NAME OF DOG**

<p style="text-align:center;"><b>CHECK ONE &amp; ENTER NUMBER BELOW:</b></p> <table style="width:100%;"> <tr> <td>_____ CKC REG. NO.</td> <td>_____ CKC ERN NO.</td> </tr> <tr> <td>_____ CKC MISC. CERT. NO.</td> <td>_____ LISTED</td> </tr> <tr> <td>_____ CKC PEN NO.</td> <td>_____ CKC CCN NO.</td> </tr> </table>	_____ CKC REG. NO.	_____ CKC ERN NO.	_____ CKC MISC. CERT. NO.	_____ LISTED	_____ CKC PEN NO.	_____ CKC CCN NO.	<p style="text-align:center;"><b>DATE OF BIRTH</b></p> <p style="text-align:center;">____/____/____</p> <p style="text-align:center; font-size: small;">Day      Month      Year</p>	<p style="text-align:center;"><b>ON SHOW DATE IS THIS A PUPPY?</b></p> <p style="text-align:center;">_____ YES    _____ NO</p>
_____ CKC REG. NO.	_____ CKC ERN NO.							
_____ CKC MISC. CERT. NO.	_____ LISTED							
_____ CKC PEN NO.	_____ CKC CCN NO.							
<b>NUMBER:</b>	<p style="text-align:center;"><b>PLACE OF BIRTH</b></p> <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE							

**BREEDER(S)**

**SIRE**

**DAM**

**REG'D OWNER(S)** \_\_\_\_\_ **CKC MEMBERSHIP #** \_\_\_\_\_

**OWNER'S ADDRESS**

<b>CITY</b>	<b>PROV./STATE</b>	<b>POSTAL CODE</b>
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**NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW**

**AGENT'S ADDRESS**

<b>CITY</b>	<b>PROV./STATE</b>	<b>POSTAL CODE</b>
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**Mail to Owner** \_\_\_\_\_ **or Agent** \_\_\_\_\_

\_\_\_\_\_ **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** \_\_\_\_\_