OFFICIAL CANADIAN KENNEL CLUB FORM CONFORMATION



ALBERTA BOUVIER DES FLANDRES CLUB SPECIALTY BOUVIER DES FLANDRES CLUB OF CANADA SPECIALTY BOUVIER DES FLANDRES CLUB OF CANADA REGIONAL SPECIALTY

DATES: () FRIDAY, MAY 31, 2019 () SUNDAY, JUNE 2, 2019 () MONDAY, JUNE 3, 2019	LISTI	Y FEES NG FEES LOGUE L enclosed	\$ \$ \$ \$ \$		
BREED		() SV	WEEPST.	AKES SE	x:
) JUNIOR PUPPY 6-9() OP) SENIOR PUPPY 9-12() VE) 12 TO 18 MONTHS() SPI	ED BY EXHIBIT EN TERANS ECIALS ONLY KUALLY ALTER		(() BRACE) SIRE & GE) DAM & PR) BABY PUF) EXHIBITO	OGENY PY
REG. NAME OF DOG					
Check One - and - Enter Number Here [] CKC Reg. No. [] CKC ERN No. [] CKC IIII Cont N	Date D	of Birth	Y	ls This a Yes []	Puppy? No []
[] CKC Misc. Cort. No. [] Listed		1.1.2000	canada	() Elsew	here
BREEDER (S)					
SIRE					
DAM		· · · · · · · · · · · ·			
Reg'd. Owner (s)					
Owner's Address					
City	Prov.		Postal Code		
Name of Owner's Agent (if any) at the show					
Agent's Address					
City	Prov.		Post	al Code	
MAIL I.D. TO: [] OWNER OR [1 AGENT (ONLY	1 I.D. MAI	LED		
FAX ENTRIES ONLY: () VISA			• . •		
			EXPIR	Y DATE	T.
CARD #	<u> a a a a a a a a a a a a a a a a a a a</u>				

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 NO.

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