

LRCM/RCLE WC/WCI/WCX 2020

Closing: Monday, July 20, 2020 Enter Classes/Dates in Fields Below

> WC/WCI/WCX Sat/Sun, July 25/26, 2020

EVENT INFORMATION

FEES:	Entry Fee	e \$	Listing Fee \$	Total Enclosed \$
TEST ENTE	ERED:	WC 🗆	WCI 🗆	WCX 🗆

DOG INFORMATION

Registered Name of Dog:			
Breed:	Variety:	Male 🗆 Female 🗆	
CKC Registration #	CKC Miscellaneous #	CKC ERN #	
□ Listed	Insert Number Here:		
□ CKC PEN #			
dd mm	уу		
Date of Birth:	Place Of Birth:	🗆 Canada 🗆 Elsewhere	
Breeder(s):			
Sire:			
Dam:			

OWNER(S) & AGENT INFORMATION

Registered Owner(s):

		Membe	ership No	
		Membe	ership No	
		Membership No.		
Handler:				
Owner's Address:				
	Street Address	City	Province	Postal Code
Name of Agent (if an	y):			
Agent's Address:				
-	Street Address	City	Province	Postal Code

OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

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OWNER(S) & AGENT INFORMATION

Registered Owner(s):

		Membe	rship No	
		Membership No		
		Membe	rship No.	
Handler:				
	Street Address	City	Province	Postal Code
Name of Agent (if any):			
Agent's Address:				
	Street Address	City	Province	Postal Code

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual by any additional rules and regulations appearing in the premium list.

owner(s) whose name(s) I have entered above and accept full responsibility for all statements made owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry, I (we) agree to be bound by the rules and regulations of The Canadian Kennel Club and in 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

Signature of Owner or Agent

Telephone Number

Email