



Official Canadian Kennel Club Entry Form
SCENTRAL ONTARIO TRACKERS
TD & TDX TRACKING TEST SUNDAY NOVEMBER 10, 2024
ENTRIES CLOSE: Nov 6TH 12:00 PM

Entry Fee _____ TCN Fee (\$11.30) _____ TOTAL _____

MAIL ENTRIES: Andrea Lister 154 Clarke Rd, Paris, ON, N3L3E1 or email to: alister@wlu.ca

BREED: _____ VARIETY: _____ SEX: ___ Male ___ Female

CLASS: ___ TD (\$85) ___ TDX (\$100)

___ Check here if the dog has already earned the title for the class you are entering

REG. NAME OF DOG: _____

___ CKC REG. ___ CKC ERN CHECK ONE AND ENTER NUMBER HERE:
___ CKC PEN ___ CKC MISC.
___ LISTED ___ CKC CCN _____

DATE OF BIRTH: Month _____ Day _____ Year _____ Call name: _____

PLACE OF BIRTH: ___ Canada ___ Elsewhere

BREEDER(S): _____

SIRE: _____

DAM: _____

REG'D OWNER(S): _____ CKC Member # _____

OWNER'S ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

NAME OF OWNER'S AGENT: _____

AGENT'S ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

SEND ANY COMMUNICATION TO: ___ OWNER ___ AGENT

I CERTIFY that I am the registered owner(s) of the dog or that I am authorized agent of the owner(s) whose names 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 NUMBER:

EMAIL ADDRESS: