

**OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM
ELLIOT LAKE AND AREA KENNEL CLUB**

Obedience: SAT Trial 1 [] SAT Trial 2 [] SUN Trial 3 [] SUN Trial 4 []

CHEQUES PAYABLE TO: Elliot Lake and Area Kennel Club
 MAIL TO: Martin Bates 105-22 Mississauga Avenue
 Elliot Lake, ON P5A 2L3
 ENTRY FEES: \$ _____ LISTING FEES: \$ _____ EXHIBITION: _____

Please type or print clearly

Breed		Sex	
<input type="checkbox"/> Novice A <input type="checkbox"/> Open A <input type="checkbox"/> PreNovice <input type="checkbox"/> Novice B <input type="checkbox"/> Open B <input type="checkbox"/> Veteran <input type="checkbox"/> Novice C <input type="checkbox"/> Utility A <input type="checkbox"/> Exhibition <input type="checkbox"/> Utility B <input type="checkbox"/> Novice Intermediate		<input type="checkbox"/> Jumps <input type="checkbox"/> Height <input type="checkbox"/> Width	
Registered Name:			
Check One Only	Enter Number	Date of Birth	
<input type="checkbox"/> CKC REG No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> CKC PEN No. <input type="checkbox"/> Listed		D ___ M ___ Y ___	
		Place of Birth	
		<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	
Breeder(s)			
Sire			
Dam			
Reg'd Owner(s)			
Owner's Address			
City	Prov.	Code	
Agent's Name (if any)			
Agent's Address			
City	Prov.	Code	

Mail I.D. to Owner [] Agent [] Email: _____

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 CKC and by any additional rules and regulations appearing in the premium list

SIGNATURE _____	PHONE# _____
VISA/MC# _____	
EXPIRY DATE _____	CVV _____

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ELLIOT LAKE AND AREA KENNEL CLUB**

RALLY: SAT Trial 1 [] SAT Trial 2 [] SUN Trial 3 [] SUN Trial 4 []

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 Elliot Lake, ON P5A 2L3
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Please type or print clearly

Breed		Sex	
<input type="checkbox"/> Rally Novice A <input type="checkbox"/> Advanced B <input type="checkbox"/> Rally Novice B <input type="checkbox"/> Excellent A <input type="checkbox"/> Advanced A <input type="checkbox"/> Excellent B <input type="checkbox"/> Exhibition		<input type="checkbox"/> Jumps <input type="checkbox"/> Height <input type="checkbox"/> Width	
Registered Name:			
Check One Only	Enter Number	Date of Birth	
<input type="checkbox"/> CKC REG No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> CKC PEN No. <input type="checkbox"/> Listed		D ___ M ___ Y ___	
		Place of Birth	
		<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	
Breeder(s)			
Sire			
Dam			
Reg'd Owner(s)			
Owner's Address			
City	Prov.	Code	
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