



OFFICE USE		OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM <b>ACSCC AB Region</b>		OFFICE USE
_____ Entry Fee _____ Listing Fee _____ Prepaid Catalogue _____ Total				
PLEASE TYPE OR PRINT CLEARLY				
<b>BREED</b>			VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ENTER IN THE FOLLOWING CLASSES: <b>CONFORMATION</b> <input type="checkbox"/> BABY PUPPY <input type="checkbox"/> SPECIALS ONLY <input type="checkbox"/> BRACE <input type="checkbox"/> JUNIOR PUPPY <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> STUD DOG & GET <input type="checkbox"/> SENIOR PUPPY <input type="checkbox"/> EXHIBITION ONLY (3-6 Mo.) <input type="checkbox"/> BROOD BITCH & PROGENY <input type="checkbox"/> 12 - 18 MONTH <input type="checkbox"/> VETERANS <input type="checkbox"/> STRIPPED DOWN <input type="checkbox"/> CANADIAN BRED <input type="checkbox"/> ALTERED <input type="checkbox"/> SWEEPSTAKES <input type="checkbox"/> BRED BY EXHIBITOR <input type="checkbox"/> PARADE OF TITLEHOLDERS <input type="checkbox"/> OPEN <input type="checkbox"/> PARADE OF VETERANS				
<b>REG. NAME OF DOG</b>				
CHECK ONE - AND - ENTER NUMBER BELOW		DATE OF BIRTH	ON SHOW DATE IS THIS A PUPPY?	
<input type="checkbox"/> CKC REG. NO.	<input type="checkbox"/> CKC ERN NO.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> CKC MISC. CERT. NO.	<input type="checkbox"/> LISTED			
NUMBER:		PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE		
BREEDER(S)				
SIRE				
DAM				
REG'D OWNER(S)				
OWNER'S ADDRESS				
CITY	PROV./STATE	POSTAL CODE		
NAME OF OWNER'S AGENT (IF ANY) AT THE SHOW				
AGENT'S ADDRESS				
CITY	PROV./STATE	POSTAL CODE		
<i>IDs will not be mailed – please supply email address below for entry confirmation</i>				
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX				
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: _____			TELEPHONE NUMBER _____	