



**OFFICIAL CANADIAN KENNEL CLUB FORM
OBEDIENCE TRIALS
GOLDEN RETRIEVER CLUB OF GREATER TORONTO**

Sat. Jan. 28, 2017	Sun. Jan. 29, 2017	Entry Fees \$ _____
<input type="checkbox"/> Trial 1	<input type="checkbox"/> Trial 1	Listing Fees \$ _____
<input type="checkbox"/> Trial 2	<input type="checkbox"/> Trial 2	Catalogue \$ _____
		TOTAL \$ _____

Entries Close 8:00 pm Fri. January 13, 2017

Please type or print clearly

Breed _____ **Sex** _____

Enter in the following classes:

- | | | |
|--|--|----------------------------|
| <input type="checkbox"/> Pre-Novice | <input type="checkbox"/> Open "A" | JUMPS: HEIGHT _____ |
| <input type="checkbox"/> Novice "A" | <input type="checkbox"/> Open "B" | |
| <input type="checkbox"/> Novice "B" | <input type="checkbox"/> Utility "A" | WIDTH _____ |
| <input type="checkbox"/> Novice "C" | <input type="checkbox"/> Utility "B" | |
| <input type="checkbox"/> Novice Intermediate | <input type="checkbox"/> Exhibition Only | |

Reg. Name of Dog _____

Check One - and -	Enter Number Here	Date of Birth
<input type="checkbox"/> CKC Reg. No.		D ____ M ____ Y ____
<input type="checkbox"/> CKC ERN		
<input type="checkbox"/> CKC PEN		Place of Birth
<input type="checkbox"/> Listed		<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____ **CKC Memb. #** _____

Owner's Address _____

City _____ **Prov.** _____ **Code** _____

Name of Owner's Agent (if any) at the Trial _____

Agent's Address _____

City _____ **Prov.** _____ **Code** _____

Mail I.D. to Owner or Agent

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 _____ **TELEPHONE NO.** _____

E-MAIL ADDRESS _____