

	Official Canadian Kennel Club Entry Form South Shore Kennel Club Obedience	Administrative use only
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<input type="checkbox"/> Obed Trial 1	Entry fees: _____ x \$26.00 = _____	
<input type="checkbox"/> Obed Trial 2	Listing Fees: _____ x \$ 9.80 = _____	
	Ex. Only: _____ x \$10.00 = _____	
	Wild Card Entry Fee _____ x \$ 17.00 = _____	
	Catalog: _____ x \$ 8.00 = _____	
<input type="checkbox"/> Catalog	Total: _____	

Please Print or type CLEARLY

Enter in one only of the following classes

<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre-Novice
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.
<input type="checkbox"/> Open B	<input type="checkbox"/> Wild Card <input type="checkbox"/> Novice <input type="checkbox"/> Open <input type="checkbox"/> Utility
<input type="checkbox"/> Utility A	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Utility B	Jump Height _____

BREED	VARIETY	SEX
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NAME OF DOG

Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed _____	Date Of Birth _____ <small>Day Month Year</small>	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ Elsewhere
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BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS


CITY	PROV	POST CODE
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Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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. Also, by signing this form I certify that I will not hold the Show giving Club, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
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Email address _____

	Official Canadian Kennel Club Entry Form South Shore Kennel Club Rally	Administrative use only
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<input type="checkbox"/> Rally Trial 1	Entry fees: _____ x \$26.00 = _____	
<input type="checkbox"/> Rally Trial 2	Listing Fees: _____ x \$ 9.80 = _____	
	Ex. Only: _____ x \$10.00 = _____	
	Catalog: _____ x \$ 8.00 = _____	
<input type="checkbox"/> Catalog	Total: _____	

Please Print or type CLEARLY

Enter in one only of the following classes **RALLY OBEDIENCE**

<input type="checkbox"/> Novice A	<input type="checkbox"/> Excellent A
<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent B
<input type="checkbox"/> Intermediate	<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Advanced A	Rally Jump Height _____
<input type="checkbox"/> Advanced B	

BREED	VARIETY	SEX
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NAME OF DOG

Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed _____	Date Of Birth _____ <small>Day Month Year</small>	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ Elsewhere
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BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
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Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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. Also, by signing this form I certify that I will not hold the Show giving Club, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
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Email address _____