


OFFICE USE	OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM Yukon Kennel Club June 15,16 & 17 2018	OFFICE USE
I enclose \$_____ Entry Fees \$_____ Listing Fees \$_____ <i>Prepaid Catalogue</i> \$_____		
Show 1 Show 2 Show 3 Show 4 Show 5 Show 6		
BREED _____		VARIETY _____ <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Junior Puppy <input type="checkbox"/> Senior Puppy <input type="checkbox"/> 12-18 Months <input type="checkbox"/> Canadian Bred <input type="checkbox"/> Bred By Exhibitor <input type="checkbox"/> Open </div> <div style="width: 45%;"> <input type="checkbox"/> Specials Only <input type="checkbox"/> Baby Puppy <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Exhibition Only (3-6)m <input type="checkbox"/> Veterans <input type="checkbox"/> Altered </div> </div>		
REG. NAME OF DOG _____		
CHECK ONE – AND - ENTER NUMBER BELOW <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> CKC PEN NO.	DATE OF BIRTH _____ / _____ / _____ Month Day Year	ON SHOW DATE IS THIS A PUPPY? <input type="checkbox"/> YES <input type="checkbox"/> NO
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 _____
<u>IDs will not be mailed – please supply email address below for entry confirmation</u>		
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS 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 _____		Telephone number _____
E-MAIL: _____		

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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 _____		
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E-MAIL: _____		

OFFICE USE		OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM OBEDIENCE & RALLY OBEDIENCE Yukon Kennel Club June 15, 16 & 17, 2018	OFFICE USE
Rally Obedience _____ Friday Trial 1 _____ Saturday Trial 2 _____ Saturday Trial 3 _____ Sunday Trial 4		_____ Entry Fee _____ Listing Fee _____ Prepaid Catalogue _____ Total	OBEDIENCE _____ Friday Trial 1 _____ Saturday Trial 2 _____ Saturday Trial 3 _____ Sunday Trial 4
PLEASE TYPE OR PRINT CLEARLY			
BREED _____		VARIETY _____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ENTER IN THE FOLLOWING CLASSES: RALLY OBEDIENCE _____ NOVICE A (R.N.) _____ NOVICE B (R.N.) _____ INTERMEDIATE _____ ADVANCED "A" (R.A.) _____ ADVANCED "B" (R.A.) _____ EXCELLENT "A" (R.E.) _____ EXCELLENT "B" (R.E.) _____ RALLY MASTER		ENTER IN THE FOLLOWING CLASSES: OBEDIENCE _____ EXHIBITION ONLY (RALLY) _____ EXHIBITION ONLY (3-6 Mo.) _____ Team _____ Brace _____ JUMP HEIGHT _____ NOVICE A _____ NOVICE B _____ OPEN HA _____ OPEN 18A _____ OPEN HB _____ OPEN 18B _____ UTILITY A _____ UTILITY B _____ PRE-NOVICE _____ NOVICE C _____ NOVICE INTERMED JUMP HEIGHT _____ _____ EXHIBITION ONLY OBED _____ Exhibition Only (3-6)m	
REG'D. NAME OF DOG			
CHECK ONE & ENTER NUMBER BELOW: _____ CKC REG. NO. _____ CKC MISC. CERT. NO. _____ CKC PEN NO.		DATE OF BIRTH _____ / _____ / _____ Day Month Year	ON SHOW DATE IS THIS A PUPPY? _____ YES _____ NO
NUMBER: _____		PLACE OF BIRTH _____ CANADA _____ ELSEWHERE	
BREEDER(S)			
SIRE			
DAM			
REG'D OWNER(S)		CKC MEMBERSHIP #	
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
Mail to Owner _____ or Agent _____			
_____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS CARD NO. _____ EXPIRY _____ / _____ CARDHOLDER NAME (PLEASE PRINT) _____			
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SIGNATURE OF OWNER OR AGENT _____			
E-MAIL ADDRESS: _____		TELEPHONE NUMBER _____	