



OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM OBEDIENCE CRANBROOK & DISTRICT KENNEL CLUB September 28 – September 29, 2019	OFFICE USE				
OBEDIENCE TRIALS _____ Saturday #1 _____ Sunday #3 _____ Saturday #2 _____ Sunday #4		Entry fee _____ Listing fee _____ Catalogue _____ TOTAL _____				
PLEASE TYPE OR PRINT CLEARLY PREPAID CATALOGUE						
BREED		VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			
ENTER IN THE FOLLOWING CLASSES: <table style="width:100%; border:none;"> <tr> <td style="width:33%;"> <input type="checkbox"/> PRE-NOVICE <input type="checkbox"/> NOVICE A <input type="checkbox"/> NOVICE B <input type="checkbox"/> NOVICE C <input type="checkbox"/> NOVICE INTERMEDIATE <input type="checkbox"/> OPEN HA </td> <td style="width:33%;"> <input type="checkbox"/> OPEN HB <input type="checkbox"/> OPEN 18A <input type="checkbox"/> OPEN 18B <input type="checkbox"/> UTILITY A <input type="checkbox"/> UTILITY B <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT </td> <td style="width:33%;"> <input type="checkbox"/> GRADUATE NOVICE <input type="checkbox"/> GRADUATE OPEN <input type="checkbox"/> BRACE <input type="checkbox"/> TEAM <input type="checkbox"/> VETERANS <input type="checkbox"/> VERSATILITY <input type="checkbox"/> WILD CARD _____ LEVEL </td> </tr> </table>				<input type="checkbox"/> PRE-NOVICE <input type="checkbox"/> NOVICE A <input type="checkbox"/> NOVICE B <input type="checkbox"/> NOVICE C <input type="checkbox"/> NOVICE INTERMEDIATE <input type="checkbox"/> OPEN HA	<input type="checkbox"/> OPEN HB <input type="checkbox"/> OPEN 18A <input type="checkbox"/> OPEN 18B <input type="checkbox"/> UTILITY A <input type="checkbox"/> UTILITY B <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT	<input type="checkbox"/> GRADUATE NOVICE <input type="checkbox"/> GRADUATE OPEN <input type="checkbox"/> BRACE <input type="checkbox"/> TEAM <input type="checkbox"/> VETERANS <input type="checkbox"/> VERSATILITY <input type="checkbox"/> WILD CARD _____ LEVEL
<input type="checkbox"/> PRE-NOVICE <input type="checkbox"/> NOVICE A <input type="checkbox"/> NOVICE B <input type="checkbox"/> NOVICE C <input type="checkbox"/> NOVICE INTERMEDIATE <input type="checkbox"/> OPEN HA	<input type="checkbox"/> OPEN HB <input type="checkbox"/> OPEN 18A <input type="checkbox"/> OPEN 18B <input type="checkbox"/> UTILITY A <input type="checkbox"/> UTILITY B <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT	<input type="checkbox"/> GRADUATE NOVICE <input type="checkbox"/> GRADUATE OPEN <input type="checkbox"/> BRACE <input type="checkbox"/> TEAM <input type="checkbox"/> VETERANS <input type="checkbox"/> VERSATILITY <input type="checkbox"/> WILD CARD _____ LEVEL				
REG'D. NAME OF DOG						
CHECK ONE & ENTER NUMBER BELOW: <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC CCN NO.		DATE OF BIRTH _____ / _____ / _____ Day Month 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)		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			
<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 <i>(No credit card payments on paper entries)</i>						
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 ADDRESS: _____						

OFFICE USE	 OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM RALLY OBEDIENCE CRANBROOK & DISTRICT KENNEL CLUB September 28 - September 29, 2019	OFFICE USE				
RALLY OBEDIENCE TRIALS _____ Saturday #1 _____ Sunday #2		Entry fee _____ Listing fee _____				
PLEASE TYPE OR PRINT CLEARLY PREPAID CATALOGUE						
BREED		VARIETY	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			
ENTER IN THE FOLLOWING CLASSES: <table style="width:100%; border:none;"> <tr> <td style="width:33%;"> <input type="checkbox"/> NOVICE A (RN) <input type="checkbox"/> NOVICE B (RN) <input type="checkbox"/> INTERMEDIATE (RI) <input type="checkbox"/> ADVANCED "A" </td> <td style="width:33%;"> <input type="checkbox"/> ADVANCED "B" (RA) <input type="checkbox"/> EXCELLENT "A" (RE) <input type="checkbox"/> EXCELLENT "B" (RE) <input type="checkbox"/> MASTER (RM) </td> <td style="width:33%;"> <input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT </td> </tr> </table>				<input type="checkbox"/> NOVICE A (RN) <input type="checkbox"/> NOVICE B (RN) <input type="checkbox"/> INTERMEDIATE (RI) <input type="checkbox"/> ADVANCED "A"	<input type="checkbox"/> ADVANCED "B" (RA) <input type="checkbox"/> EXCELLENT "A" (RE) <input type="checkbox"/> EXCELLENT "B" (RE) <input type="checkbox"/> MASTER (RM)	<input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT
<input type="checkbox"/> NOVICE A (RN) <input type="checkbox"/> NOVICE B (RN) <input type="checkbox"/> INTERMEDIATE (RI) <input type="checkbox"/> ADVANCED "A"	<input type="checkbox"/> ADVANCED "B" (RA) <input type="checkbox"/> EXCELLENT "A" (RE) <input type="checkbox"/> EXCELLENT "B" (RE) <input type="checkbox"/> MASTER (RM)	<input type="checkbox"/> EXHIBITION ONLY <input type="checkbox"/> JUMP HEIGHT				
REG'D. NAME OF DOG						
CHECK ONE & ENTER NUMBER BELOW: <input type="checkbox"/> CKC REG. NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC MISC. CERT. NO. <input type="checkbox"/> LISTED <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> CKC CCN NO.		DATE OF BIRTH _____ / _____ / _____ Day Month 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)		CKC MEMBERSHIP #				
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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CARD NO. _____			EXPIRY _____ / _____			
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SIGNATURE OF OWNER OR AGENT _____		TELEPHONE NUMBER: _____				
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