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|--|---|---|
|  <b>Official Canadian Kennel Club Entry Form</b>   | <b>N S German Shepherd Dog Club</b>   | Administrative use only                     |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">             see P.L. for Entry fees<br/>             Listing Fees:<br/>             Unofficial:<br/>             Ex. Only:<br/>             Catalog:<br/>             Total:           </div> <div style="width: 65%;">             Entry fees: ____ x \$ ____ = ____<br/>             ____ x \$11.50 = ____<br/>             ____ x \$15.00 = ____<br/>             ____ x \$10.00 = ____<br/>             ____ x \$ 6.00 = ____<br/>             _____           </div> </div>  |   |   |
| Please Print or type CLEARLY   |   |   |
| <b>Enter in one only of the following classes</b>  |   |   |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 65%;"> <input type="checkbox"/> Baby Puppy<br/> <input type="checkbox"/> Junior Puppy<br/> <input type="checkbox"/> Senior Puppy<br/> <input type="checkbox"/> 12-18 Month<br/> <input type="checkbox"/> Canadian Bred<br/> <input type="checkbox"/> Bred By Exhibitor           </div> <div style="width: 30%; text-align: center; font-weight: bold; font-size: small;">UNOFFICIAL CLASSES</div> <div style="width: 5%;"> <input type="checkbox"/> Open<br/> <input type="checkbox"/> Veterans<br/> <input type="checkbox"/> Specials Only<br/> <input type="checkbox"/> Exhibition Only<br/> <input type="checkbox"/> Altered Class           </div> </div> |   |   |
| BREED  | VARIETY   | SEX   |
| NAME OF DOG  |   |   |
| <b>Check one &amp; enter Reg # here</b><br><input type="checkbox"/> CKC Reg #<br><input type="checkbox"/> CKC ERN #<br><input type="checkbox"/> CKC MSC #<br><input type="checkbox"/> Listed   | <b>Date Of Birth</b><br>Day ____ Month ____ Year ____<br><b>Place Of Birth</b> ____ Canada ____ Elsewhere | <b>Is this a puppy?</b><br>YES ____ NO ____ |
| BREEDER  |   |   |
| SIRE   |   |   |
| DAM  |   |   |
| REG. OWNER   |   |   |
| OWNER ADDRESS  |   |   |
| CITY   | PROV  | POST CODE                                   |
| AGENT NAME   |   |   |
| AGENT ADDRESS  |   |   |
| CITY   | PROV  | POST CODE                                   |
| 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 _____                          |
| Email: _____   |   |   |

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| NAME OF DOG  |   |   |
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| BREEDER  |   |   |
| SIRE   |   |   |
| DAM  |   |   |
| REG. OWNER   |   |   |
| OWNER ADDRESS  |   |   |
| CITY   | PROV  | POST CODE                                   |
| AGENT NAME   |   |   |
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