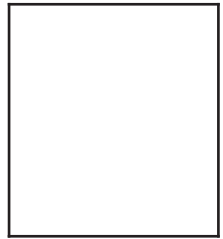




West Kootenay Kennel Club Entry Form

August 15, 16, & 17, 2008

Conformation	Obedience
Friday Show 1 []	Saturday Trial 1 []
Friday Show 2 []	Saturday Trial 2 []
Saturday Show 3 []	Sunday Trial 1 []
Sunday Show 4 []	Sunday Trial 2 []



R&S PRO SERVICES STE 222 #63 4307 130TH ST SE CALGARY, AB T2Z 3Y8

FX: 403 724 0065 or 403 203 0330 CLOSING JULY 30TH NOON MST

Entry Fees () Listing Fees () Catalogue () P/F () Total ()

Breed	Variety	Sex
-------	---------	-----

Enter The Following Classes: [] Specials Only [] Novice A [] Utility
 [] Junior Puppy [] Canadian Bred [] Veteran Sweeps [] Novice B
 [] Senior Puppy [] Bred by Exhibitor [] Juvenile Sweeps [] Open A High: _____
 [] 12 - 18 Months [] Open [] Exhibition Only [] Open B Broad: _____

Registered Name Of Dog:

Check One - and - Enter Number Here Date of Birth Is This a Puppy?
 [] CKC Reg. D ___ M ___ Y ___ Yes [] No []
 [] CKC ERN No.
 [] CKC Misc. Cert. Place of Birth
 [] Listed [] Canada [] Elsewhere

Breeder(s):
Sire:
Dam:
Reg'd. Owner (s):
Owner's Address:
City: Prov: Postal Code:
Name of Owner's Agent (if any) at the show:
Agent's Address: City: Prov: Postal Code:
Mail I.D. TO: [] Owner Or [] Agent (Only 1 I.D. Mailed)
Fax Entries Only: (Fee: \$2/ Dog / Show Or Trial) [] Visa [] Mastercard
Card Holder Name (Please print):
Card #: Expiry:
Cardholder's Signature: Email:

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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.

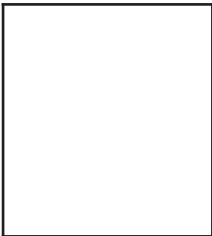
 SIGNATURE OF OWNER OR AGENT () TELEPHONE NO.



West Kootenay Kennel Club Entry Form

August 15, 16, & 17, 2008

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Breeder(s):
 Sire:
 Dam:
 Reg'd. Owner (s):
 Owner's Address:
 City: Prov: Postal Code:
 Name of Owner's Agent (if any) at the show:
 Agent's Address: City: Prov: Postal Code:
 Mail I.D. T0: [] Owner Or [] Agent (Only 1 I.D. Mailed)
 Fax Entries Only: (Fee: \$2/ Dog / Show Or Trial) [] Visa [] Mastercard
 Card Holder Name (Please print):
 Card #: Expiry :
 Cardholder's Signature: Email:

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