



# OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

## Conformation Show: Interior Cavalier King Charles Spaniel Club



\_\_\_\_\_ **Saturday Sept 5, 2020**  
\_\_\_\_\_ **Sunday Sept 6, 2020**

Show Secretary: Arctidreams Show Services Phone: 780-814-366

Comp 56 Site 11RR 2 Sexsmith Alberta Fax: 877-993-6879

Entry Fees \$\_\_\_\_\_ TCN Fees \$\_\_\_\_\_ Catalogue \$\_\_\_\_\_ P/F \$\_\_\_\_\_ Total \$\_\_\_\_\_

Breed: **Cavalier King Charles Spaniel** Color \_\_\_\_\_ Sex \_\_\_\_\_

<b>Enter in the following Regular and Non-regular classes</b>		
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Open Black & Tan	<input type="checkbox"/> Stud Dog and Get
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open Blenheim	<input type="checkbox"/> Brood Bitch and Progeny
<input type="checkbox"/> 12 to 15 Months	<input type="checkbox"/> Open Ruby	<input type="checkbox"/> Brace
<input type="checkbox"/> 15 to 18 Months	<input type="checkbox"/> Open Tri-Colour	<input type="checkbox"/> Baby Puppy
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Altered
<input type="checkbox"/> Bred by Exhibitor		
<input type="checkbox"/> Veterans 7 to 9 Years		<input type="checkbox"/> Exhibition Only
<input type="checkbox"/> Veterans 9 to 11 Years		
<input type="checkbox"/> Veterans 11 Years +		

<b>Enter in the following Sweepstakes Classes</b>				
<input type="checkbox"/> 3-6 Month	<input type="checkbox"/> 6 to 9 Months	<input type="checkbox"/> 9 to 12 Months	<input type="checkbox"/> 12 to 15 Months	<input type="checkbox"/> 15 to 18 Months
<input type="checkbox"/> 7 to 9 Years	<input type="checkbox"/> 9 to 11 Years	<input type="checkbox"/> 11 Years +		

Reg. Name of Dog \_\_\_\_\_

Please Check one and enter number here \_\_\_\_\_

- CKC Reg. No.
- CKC ERN No.
- CKC Misc. Cert No.
- CKC PEN No.

TCN (No CKC/ERN No.)

Date of Birth M\_\_\_\_ D\_\_\_\_ Y\_\_\_\_ Is this a puppy? Y\_\_\_\_ N\_\_\_\_ Place of Birth Canada  Elsewhere

Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

Reg. Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Owner's Agent: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mail to:  Owner  Agent

I accept full responsibility for all statements made of this entry. I hereby certify that I understand the CKC rules and regulations, conditions and provisions in the Premium List for this show and agree to be bound by the same.

Visa  MasterCard  Amex

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cardholder Name: (Print) \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Signature of Owner/Agent: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Number Of People In Your Party Attending Event: \_\_\_\_\_**