
		Official Canadian Kennel Club Entry Form New Brunswick Kennel Club 18th ~ 20th August 2023		Administrative use only
<input type="checkbox"/> Show #1 <input type="checkbox"/> Show #2 <input type="checkbox"/> Show #3 <input type="checkbox"/> Show #4				
Regular Entry Fee _____ x \$32.00 = _____		Exhibition Only _____ x \$10.00 _____		
Baby Puppy/Veteran _____ x \$15.00 = _____		Catalogue _____ x \$10.00 _____		
TCN Fees _____ x \$11.50 = _____		TOTAL ENCL \$ _____		
Trailer/RV/Tent (Required Form & Funds Enclosed – See Premium List)		\$ _____		
Make Cheques Payable To - NEW BRUNSWICK KENNEL CLUB				
Please Print or type CLEARLY				
Enter one only of the following Regular Classes			Non-Regular Classes	
<input type="checkbox"/> Jr Puppy		<input type="checkbox"/> Bred by Exhibitor		<input type="checkbox"/> 4-6 month (Baby Puppy)
<input type="checkbox"/> Sr Puppy		<input type="checkbox"/> Open		<input type="checkbox"/> Veterans
<input type="checkbox"/> 12-18 Month		<input type="checkbox"/> Specials		
<input type="checkbox"/> Canadian Bred		<input type="checkbox"/> Exhibition Only		
BREED		VARIETY		SEX
NAME OF DOG				
Check one & enter Reg # here <input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> TCN		Date Of Birth _____ Day Month Year	Is this a puppy? YES ___ NO ___	
		Place Of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere		
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 Federation of Canada 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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