

# Official Kennel Club Entry Form

Wheat City Kennel Club



### Conformation

Fri. Nov 13 AM \_\_\_\_\_  
Sat Nov 14 \_\_\_\_\_  
Sun. Nov 15 \_\_\_\_\_

### CONFORMATION ENTRY ONLY

Fri. Nov 13 PM \_\_\_\_\_  
Prepaid Catalogue \$8.00 \_\_\_\_\_ (\$10.00 at show)

**Entries Closes: October 27, 2015, 9:00 PM.CST.**

**Same Dog, Same Class all 4 shows : \$90.00 or \$27 per show Listing fees: \$8.82 Exhibition only: \$8.00**

ENTRY	LISTING	TOTAL
\$	\$	\$

BREED	VARIETY	SEX
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### REGULAR CLASSES

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Jr. Puppy         | <input type="checkbox"/> 12 – 18 Months  | <input type="checkbox"/> Brace Saturday         |
| <input type="checkbox"/> Sr. Puppy         | <input type="checkbox"/> Open            | <input type="checkbox"/> Juvenile Sweeps        |
| <input type="checkbox"/> Canadian Bred     | <input type="checkbox"/> Specials Only   | <input type="checkbox"/> Veteran's Extravaganza |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | Call Name : _____                               |
|  |  | <input type="checkbox"/> Altered                |

REGISTERED NAME
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Check one ONLY      Enter Number      Date of Birth      Puppy

<input type="checkbox"/> CKC Reg. No.		Day    Month    Year	Yes <input type="checkbox"/>
<input type="checkbox"/> CKC ERN No.			No <input type="checkbox"/>
<input type="checkbox"/> CKC Misc.Cert.No.			
<input type="checkbox"/> Listed		Place of Birth	
		<input type="checkbox"/> Canada	<input type="checkbox"/> Elsewhere

Breeders: \_\_\_\_\_

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

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

Reg'd Owner (s) \_\_\_\_\_

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

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Agent's Name(if any) \_\_\_\_\_

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

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Mail Confirmation To:  Owner  Agent

Owner/Agent Signature & Email \_\_\_\_\_

**MAIL ENTRIES TO: WCKC, c/o Corinne Walker, 145 Pacific Ave, Winnipeg, R3B 2Z6**

### VISA/MASTERCARD INFORMATION

FAX ENTRIES TO: 204-237-0965

VISA  MASTERCARD      CARD NO. \_\_\_\_\_ + 3 digits \_\_\_\_\_

EXPIRY DATE \_\_\_\_\_ / \_\_\_\_\_      NAME OF CARDHOLDER \_\_\_\_\_  
Month    Year      (Please print)

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) are entered above and I 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 CKC and by any additional rules and regulations in the premium list.

Signature \_\_\_\_\_ Ph. No. \_\_\_\_\_ Email \_\_\_\_\_

PLEASE PRINT YOUR EMAIL CLEARLY SO THAT WE CAN EMAIL YOU YOUR CONFIRMATION OF ENTRY!

**ONLINE ENTRIES ACCEPTED AT [WWW.ENTRYLINE.COM](http://WWW.ENTRYLINE.COM) until 5:00 pm EST Oct 27, 2015**  
**Or Fax entries to 204-925-5623. Fax entries will be processed by "Manitoba K9 Association".**  
**Note there is a 10% service charge in you use the fax service.**