

Official Entry Form
AVALON KENNEL CLUB

May 21 /2016 Show 1 May 21 /2016 Trial 1 Entry Fees _____
 May 21 /2016 Show 2 May 22 /2016 Trial 2 Listing Fees _____
 May 22 /2016 Show 3 May 21 /2016 Rally 1 Catalogue _____
 May 22 /2016 Show 4 May 22 /2016 Rally 2 Total Fees \$ _____

Conformation		Obedience		Rally Obedience	
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Open A	<input type="checkbox"/> RNov. A	<input type="checkbox"/> RExc. A
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Novice A	<input type="checkbox"/> Open B	<input type="checkbox"/> RNov. B	<input type="checkbox"/> RExc. B
<input type="checkbox"/> 12-18 Months	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Novice B	<input type="checkbox"/> Utility A	<input type="checkbox"/> RIntermediate	
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Novice C	<input type="checkbox"/> Utility B	<input type="checkbox"/> RAdv. A	<input type="checkbox"/> RAdv. B
<input type="checkbox"/> Baby Puppy Class		<input type="checkbox"/> Intermediate Novice		<input type="checkbox"/> R.A.E	
<input type="checkbox"/> 3-6 Month Puppy (Exhibition Only)		<input type="checkbox"/> Exhibition Only		<input type="checkbox"/> Exhibition Only	
		Jump Height _____		Jump Height _____	

Breed: _____ Variety _____ Sex _____

Reg. Name of Dog: _____

Check One Here <input type="checkbox"/> CKC REG. NO. _____ <input type="checkbox"/> CKC ERN. NO. _____ <input type="checkbox"/> CKC Misc. Cert. No. _____ <input type="checkbox"/> CKC PEN. NO _____ <input type="checkbox"/> CKC CCN. NO _____ <input type="checkbox"/> LISTED _____	Enter Number _____	Date of Birth – Circle Month Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec	Is this a puppy? Yes _____ No _____
		Day _____ Year _____ Place of Birth - Canada _____ Elsewhere _____	

Breeders: _____

Sire: _____

Dam: _____

Reg'd Owner(s): _____

Owner's Address: _____

City/Province: _____ Postal Code: _____


Agent: _____

Agent's Address: _____

City/Province: _____ Postal Code: _____

Mail ID: Owner Agent _____

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 If the registered owner(s) is/are CKC member(s), please provide CKC number(s) _____

I certify that I am the registered owner(s) of the 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 consideration 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: _____ Telephone No. _____

Email address: _____

(Please print)