



**NSDTR Club of Canada
2019 National Specialty**

Closing: Wednesday, July 24, 2019
Enter Classes/Dates in Fields Below

**WC/WCI/WCX
Thursday, August 1, 2019**



**NSDTR Club of Canada
2019 National Specialty**

Closing: Wednesday, July 24, 2019
Enter Classes/Dates in Fields Below

**WC/WCI/WCX
Thursday, August 1, 2019**



EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____ Total Enclosed \$ _____
TEST ENTERED: WC WCI WCX

DOG INFORMATION

Registered Name of Dog: _____
Breed: _____ Variety: _____ Male Female
 CKC Registration # CKC Miscellaneous # CKC ERN #
 Listed CKC PEN # _____
Insert Number Here: _____
dd mm yy

Date of Birth: _____ Place Of Birth: Canada Elsewhere
Breeder(s): _____
Sire: _____
Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s): _____ Membership No. _____
_____ Membership No. _____
_____ Membership No. _____

Handler: _____
Owner's Address: _____
Street Address City Province Postal Code
Name of Agent (if any): _____
Agent's Address: _____
Street Address City Province Postal Code

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, 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 Number

Email

EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____ Total Enclosed \$ _____
TEST ENTERED: WC WCI WCX

DOG INFORMATION

Registered Name of Dog: _____
Breed: _____ Variety: _____ Male Female
 CKC Registration # CKC Miscellaneous # CKC ERN #
 Listed CKC PEN # _____
Insert Number Here: _____
dd mm yy

Date of Birth: _____ Place Of Birth: Canada Elsewhere
Breeder(s): _____
Sire: _____
Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s): _____ Membership No. _____
_____ Membership No. _____
_____ Membership No. _____

Handler: _____
Owner's Address: _____
Street Address City Province Postal Code
Name of Agent (if any): _____
Agent's Address: _____
Street Address City Province Postal Code

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, 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 Number

Email