



Official Entry Form
AVALON KENNEL CLUB

May 20/ 2017 Show 1 May 20 /2017 Obed. Trial 1 Entry Fees _____
 May 20/ 2017 Show 2 May 21 /2017 Obed. Trial 2 Listing Fees _____
 May 21 /2017 Show 3 Catalogue Rally Trial 1 _____ Catalogue _____
 May 21 /2017 Show 4 Rally Trial 2 _____ Total Fees \$ _____

<u>Conformation</u>		<u>Obedience</u>		<u>Rally Obedience</u>	
<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	Enter Number	Date of Birth – Circle Month		Is this a puppy?	
<input type="checkbox"/> CKC REG. NO. _____		Jan Feb Mar Apr May Jun		Yes _____	
<input type="checkbox"/> CKC ERN. NO. _____		Jul Aug Sep Oct Nov Dec		No _____	
<input type="checkbox"/> CKC Misc. Cert. No. _____		Day _____ Year _____			
<input type="checkbox"/> CKC PEN. NO _____		Place of Birth - Canada _____			
<input type="checkbox"/> CKC CCN. NO _____		Elsewhere _____			
<input type="checkbox"/> LISTED _____					
Breeders: _____					
Sire: _____					
Dam: _____					
Reg'd Owner(s): _____					
Owner's Address: _____					
City/Province: _____			Postal Code: _____		
Agent: _____					
Agent's Address: _____					
City/Province: _____			Postal Code: _____		
Mail ID: <input type="checkbox"/> Owner <input type="checkbox"/> Agent					
<small>© Tilson Creations</small>					
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)