

**THE CANADIAN KENNEL CLUB
200 RONSON DRIVE, SUITE 400
ETOBICOKE, ONTARIO M9W 5Z9
Phone: (416) 675-5511
LANCE NOVAK, EXECUTIVE DIRECTOR**

**CKC DIRECTOR FOR EASTERN ONTARIO
BOB ROWBOTHAM
505 AIRPORT RD. RR 4
STIRLING ONTARIO K0K 3E0
(613) 395-4828**

**CKC TRACKING REP
CONNIE GAVIN
8210 Hwy 62 RR#1
FOXBORO, ONTARIO K0K 2B0
Phone: 613-969-0328**

THE CROSS COUNTRY TRACKING CLUB WILL USE ALL REASONABLE CARE TO GUARANTEE THE SAFETY OF DOGS AND PERSONS AT THE TEST. HOWEVER NEITHER THE CROSS COUNTRY TRACKING CLUB NOR ANY INDIVIDUAL WILL ACCEPT THE RESPONSIBILITY FOR LOSS OR INJURY, HOWEVER CAUSED, TO ANY DOG, PERSON OR PROPERTY

It shall be the duty, and obligation of the test-giving club to see that a judge, club volunteer, or any participant at an event held under these rules, is not subject to indignities of any kind.

ACCOMODATIONS:

Below is a list of motels in the area. Exhibitors should check with the individual motels as to whether they allow dogs in the rooms.

Please clean up after your dog(s) in all places.

Exhibitors will be held responsible for any and all damages done by their dog(s).

Motel 6
165 Consumers Drive, Whitby, On. L1N 1C4 905-665-8883

Travelodge Oshawa
940 Champlain Ave, Oshawa, On. L1J 7A6 905-436-9500

Durham Hotel &
Conference Centre Oshawa
1011 Bloor Street E, Oshawa, On. L1H 7K6 905-576-5101



**OFFICIAL PREMIUM LIST
76th LICENSED TRACKING TEST
Held under the Canadian Kennel Club Rules**

This test is open to mixed breeds and unrecognized breeds.

**TRACKING DOG and
TRACKING DOG EXCELLENT TEST
Sunday Oct 1st 2017 Clarington, Ontario**

**JUDGE: Laura McKay
15 Sagewood Place Guelph, On Guelph, On**

CLOSING DATE: Sept 14th 2017 at 8:00 PM

The club cannot accept entries delivered after this date and time.

A TD title is a prerequisite for entering a TDX test

LIMIT OF ENTRIES:	10 TD	1 TDX
FEES: TD		\$75.00
TDX		\$90.00
CKC Listing Fee		\$ 8.50

A listing fee must be included on all dogs not registered with the Canadian Kennel Club.

US Exhibitors: payment MUST be made out for the full entry amount in Canadian Funds. \$U.S. personal cheques marked "Payable in Canadian Funds" or "At Par" will not be accepted. Bank drafts or money orders payable in Canadian funds are probably the best choice.

Please make cheque payable to The Cross Country Tracking Club and send entries in separate envelopes for each entry with the correct fee to:

**CROSS COUNTRY TRACKING CLUB
EILEEN FISHER, TEST SECRETARY
53 WALKERTON DR. MARKHAM ON. L3P 1H9**

CLUB OFFICERS

President	Marie-P Babin
Vice President	Eileen Fisher
Secretary	Maryke Warwick
Treasurer	Anne Whan

TEST COMMITTEE

Test Superintendent	Eileen Fisher
Test Secretary	Eileen Fisher eileenfi@sympatico.ca
Treasurer	Anne Whan
Trophy	Eileen Fisher

VETERINARIAN: Animal Emergency Clinic of Durham Region
1910 Dundas St. E Unit B101Whitby, ON (905) 576-3031
CROSS COUNTRY TRACKING CLUB WILL NOT BE RESPONSIBLE
FOR ANY VETERINARY COSTS.

ERN:

All dogs that are foreign born and foreign owned that enter Canada for the sole purpose of entering CKC events, will no longer require a CKC registration number but will require an Event Registration Number. The ERN number **MUST** be applied for within 30 days of the first day of entering a CKC event.

PEN:

Performance Event Number allows an unregistrable dog of a CKC recognized breed to participate in those competitive events that are appropriate for the breed. A dog that is eligible for a PEN may not be entered as a listed dog. Dogs may only enter events after a PEN has been issued to that dog. This restriction shall also apply to dogs with ILP numbers.

CCN:

To compete, mixed-breed and unrecognized-breed dog owners must apply for a Canine Companion Number (CCN) and meet specific criteria as set out in the Canine Companion Club Policy

Effective January 1, 2011 - Non-Member Participation Fee

A non-member participation fee will be charged to a resident of Canada who is a non-member of the CKC. The fee will match the ERN fee. The non-member participation fee is paid in any year a title is earned and covers all titles and dogs owned by that individual. For the title to be awarded, the non-member will have a choice to either become a CKC member or pay the non-member participation fee. Failure to comply within 30 days of notification will result in the title being withheld and the dog cannot be moved up to the next level. The fee applies only to dogs wholly owned by non-member residents of Canada and is not applicable to CKC members.

All entries must be on an official CKC entry form. Owners are responsible for errors in making out entry forms, regardless of who completes the entry form.

Incomplete or improper entry forms will not be accepted. Entries **MUST** be mailed or sent by courier to the postal address of the Test Secretary.

MAIL OR COURIER DELIVERIES MUST NOT REQUIRE A SIGNATURE FOR DELIVERY Faxed, emailed or hand delivered entries will be rejected. Each entry **MUST** be in a separate MAILING envelope.

Multiple entries in one envelope will be rejected. Only one entry per event for each dog entered will be accepted. Entries will close automatically when the limit has been reached, even if the official closing date for entries has not arrived.

ENTRIES will not be accepted unless accompanied by the appropriate fee.

NO POST DATED CHEQUES WILL BE ACCEPTED.

Club Worker Option: At the entry draw **2** TD tracks will be reserved per CKC Rule 6.62 "Club Worker" is defined by CCTC Policy.

CONFIRMATION OF ENTRY:

Entrants will be notified by phone or email that their entry has been received. Entry fees will be returned within 10 days of the day of the test to Alternates who did not participate in the test. **Draw for entry:** A random draw of all entries received by the closing date and time will take place to determine placement in the test or onto an alternate list. The draw will be held at 7:00 p.m. on Friday, Sept 15th, 2017 at Tim Hortons 6565 Hwy 7, Markham, ON L3P 3B4.

Day of test, meeting place and draw: The draw for the tracks will take place at Wiggans Landscaping, 3646 Solina Rd, Bowmanville L1C 3K4.

The grounds will be open at **8:00 a.m.** and the draw will be at **8:30 a.m.** The test will start **9:00 a.m.** At the time of the draw, any entry from the alternate list may fill any absentee spaces.

Only written withdrawals received before Sept 14th, 2017 will be accepted.

BITCHES IN SEASON: Bitches in season will be permitted to compete but will be assigned the last track.

All dogs must be kept on leash and under control at all times.

PRIZES: A Rosette will be awarded to every successful participant.



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM
Cross Country Tracking Club

SHOW Tracking Dog and Tracking Dog Excellent Test

DATE Sunday Oct 1st 2017



TOTAL FEES: \$ _____ ENTRY FEES: \$ _____ LISTING FEES: (\$8.50) \$ _____
 MAKE CHEQUES PAYABLE TO CROSS COUNTRY TRACKING CLUB AND MAIL ENTRIES TO:
EILEEN FISHER, 53 WALKERTON DR. MARKHAM, ON. L3P 1H9
 ENTRIES CLOSE SEPT 14th. 2017 @ 8:00 P.M.

BREED		VARIETY		SEX <input type="checkbox"/> Male <input type="checkbox"/> Female
CLASS: <input type="checkbox"/> TD \$75.00 <input type="checkbox"/> TDX \$90.00 <input type="checkbox"/> WORKER DRAW				
REG. NAME & TITLES				
<input type="checkbox"/> CKC REG NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC Misc. Cert No. <input type="checkbox"/> CKC CCN NO. <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> LISTED		DATE OF Birth (Month/Day/Year)	Is This a Puppy? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Check one and enter number here:		PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE		
BREEDER				
SIRE				
DAM				

ACTUAL OWNERS _____

OWNERS ADDRESS _____

CITY _____ PROV _____ Postal Code _____

NAME OF OWNERS AGENT (if any) AT THE SHOW _____

AGENT'S ADDRESS _____

CITY _____ PROV _____ Postal Code _____

I CERTIFY that I am the registered owner(s) of the dog, or that I am the duly authorized agent of 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 abide 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 _____ MAIL I.D. TO: OWNER AGENT

E-MAIL ADDRESS _____



OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM
Cross Country Tracking Club

SHOW Tracking Dog and Tracking Dog Excellent Test

DATE Sunday Oct 1st 2017



TOTAL FEES: \$ _____ ENTRY FEES: \$ _____ LISTING FEES: (\$8.50) \$ _____
 MAKE CHEQUES PAYABLE TO CROSS COUNTRY TRACKING CLUB AND MAIL ENTRIES TO:
EILEEN FISHER, 53 WALKERTON DR. MARKHAM, ON. L3P 1H9
 ENTRIES CLOSE SEPT 14th. 2017 @ 8:00 P.M.

BREED		VARIETY		SEX <input type="checkbox"/> Male <input type="checkbox"/> Female
CLASS: <input type="checkbox"/> TD \$75.00 <input type="checkbox"/> TDX \$90.00 <input type="checkbox"/> WORKER DRAW				
REG. NAME & TITLES				
<input type="checkbox"/> CKC REG NO. <input type="checkbox"/> CKC ERN NO. <input type="checkbox"/> CKC Misc. Cert No. <input type="checkbox"/> CKC CCN NO. <input type="checkbox"/> CKC PEN NO. <input type="checkbox"/> LISTED		DATE OF Birth (Month/Day/Year)	Is This a Puppy? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Check one and enter number here:		PLACE OF BIRTH <input type="checkbox"/> CANADA <input type="checkbox"/> ELSEWHERE		
BREEDER				
SIRE				
DAM				

ACTUAL OWNERS _____

OWNERS ADDRESS _____

CITY _____ PROV _____ Postal Code _____

NAME OF OWNERS AGENT (if any) AT THE SHOW _____

AGENT'S ADDRESS _____

CITY _____ PROV _____ Postal Code _____

I CERTIFY that I am the registered owner(s) of the dog, or that I am the duly authorized agent of 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 abide 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 _____ MAIL I.D. TO: OWNER AGENT

E-MAIL ADDRESS _____