



Official Entry Form
Newfoundland All Breed Kennel Club

April 13/2019 Show 1 Trial 1 Rally 1 Entry Fees _____
 April 14/2019 Show 2 Trial 2 Rally 2 Listing Fees _____
 Catalogue Catalogue _____
 Total Fees \$ _____

<u>Conformation</u> <input type="checkbox"/> Junior Puppy <input type="checkbox"/> Bred By Exhibitor <input type="checkbox"/> Senior Puppy <input type="checkbox"/> Open <input type="checkbox"/> 12-18 Months <input type="checkbox"/> Specials Only <input type="checkbox"/> Canadian Bred <input type="checkbox"/> Exhibition Only <input type="checkbox"/> Baby Puppy Class <input type="checkbox"/> Veteran Class <input type="checkbox"/> Altered Class <input type="checkbox"/> 3-6 Month Puppy (Exhibition Only)		<u>Obedience</u> <input type="checkbox"/> Pre-Novice <input type="checkbox"/> Open HA <input type="checkbox"/> Novice A <input type="checkbox"/> Open18A <input type="checkbox"/> Novice B <input type="checkbox"/> Open HB <input type="checkbox"/> Novice C <input type="checkbox"/> Open18B <input type="checkbox"/> Intermediate <input type="checkbox"/> Utility A <input type="checkbox"/> Utility B <input type="checkbox"/> Exhibition Only Jump Height _____		<u>Rally Obedience</u> <input type="checkbox"/> RNov. A <input type="checkbox"/> RExc. A <input type="checkbox"/> RNov. B <input type="checkbox"/> RExc. B <input type="checkbox"/> RIntermediate <input type="checkbox"/> RAdv. A <input type="checkbox"/> RAdv. B <input type="checkbox"/> Masters (RM) <input type="checkbox"/> Exhibition Only Jump Height _____	
Breed: _____		Variety _____	Sex _____		
Reg. Name of Dog: _____					
Check One Enter Number 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		Date of Birth – Circle Month Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Day _____ Year _____ Place of Birth - Canada _____ Elsewhere _____		Is this a puppy? Yes _____ No _____	
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)