



**BATTLE RIVER CANINE ASSOCIATION  
OFFICIAL CKC ENTRY FORM  
CONFORMATION**



Show 1 Fri \_\_\_\_\_  
 Show 2 Sat \_\_\_\_\_ Pre-paid \_\_\_\_\_ Listing Fees \_\_\_\_\_  
 Show 3 Sun \_\_\_\_\_ Catalogue \_\_\_\_\_ Entry Fees \_\_\_\_\_  
 Puppy Sweepstakes \_\_\_\_\_

<u>Conformation</u>	___ Baby Puppy(Fri & Sat	<u>Sweeps</u>
___ Junior Puppy	___ 12-18 months	___ Jr Puppy
___ Senior Puppy	___ Open	___ Sr Puppy
___ Can. Bred	___ Specials Only	___ Yearling
___ Bred BY	___ Exhibition Only	
Veterans (Sat Only)	<b><u>Please Print Clearly</u></b>	

**Breed:** \_\_\_\_\_ **Sex** \_\_\_\_\_

**Registered Name of Dog** \_\_\_\_\_

Enter number _____	Date of Birth D___/M___/Y_____
<input type="checkbox"/> CKC Reg. No.	Is this a puppy Yes___ No___
<input type="checkbox"/> CKC ERN No.	Place of Birth
<input type="checkbox"/> CKC Misc. Cert. No.	Canada _____ Elsewhere___
<input type="checkbox"/> Listed	

**Breeder(s)** \_\_\_\_\_

**Sire** \_\_\_\_\_

**Dam** \_\_\_\_\_

**Reg'd Owners** \_\_\_\_\_

**Owners Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Province** \_\_\_\_\_ **PC** \_\_\_\_\_

**Name of Owner's Agent (if any) at the show** \_\_\_\_\_

**Agent's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Province** \_\_\_\_\_ **PC** \_\_\_\_\_

**Mail I.D. to Owner\_\_ or Agent\_\_** \_\_\_\_\_

**Email (for schedule and fax conformation)** \_\_\_\_\_

**Visa/MasterCard No.** \_\_\_\_\_ **expiry** \_\_\_/\_\_\_

**Name of card holder- print** \_\_\_\_\_ **Signature** \_\_\_\_\_

I CERTIFY that I am the registered owner(s) of the dog or that I am authorized agent of the owner(s) whose names I have entered and accept full responsibility for all statements made in this entry. In consideration of the acceptance of this entry, I (we) agree to be bound by the rules and regulations of the Canadian Kennel Club and by any additional rules appearing in the Premium list.

**E-mail Address** \_\_\_\_\_ **Telephone** \_\_\_\_\_



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