



OFFICIAL CANADIAN KENNEL CLUB FORM

**CONFORMATION**  
**ERIE SHORES KENNEL CLUB**

- Fri. JUNE 2, 2017
- Sat. JUNE 3, 2017
- Sun. JUNE 4, 2017
- Mon. JUNE 5, 2017

Entry Fees (\$32.00 per show) \$ \_\_\_\_\_  
 Listing Fees (\$9.60 per show) \$ \_\_\_\_\_  
 Exhibition Only (\$10.00) \$ \_\_\_\_\_  
 Baby Puppy/Veterans (\$12.00 Monday) \$ \_\_\_\_\_  
 Brace (\$10.00 Friday) \$ \_\_\_\_\_  
 Sweepstakes (\$12.00 Monday) \$ \_\_\_\_\_  
 Pre-ordered Catalogue (\$10.00 each) \$ \_\_\_\_\_  
 TOTAL enclosed \$ \_\_\_\_\_

CLOSING DATE: 8 p.m.  
MONDAY, MAY 15, 2017

Make fees payable to  
ERIE SHORES KENNEL CLUB  
and mail to:  
MJN Show Services  
9 Samya Court  
Scarborough, ON M1R 2A4

**LIMITED BREED SHOWS**

- Group 3 - Friday
- Retrievers - Friday
- Scent Hounds - Sunday
- Group 1 Spaniels - Monday

*Please type or print clearly*

Breed	Variety	Sex
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Enter in the following Classes:

<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Sweepstakes (Monday) Class: _____
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Veteran Sweepstakes (Monday) Class: _____
<input type="checkbox"/> 12 - 18 Month	<input type="checkbox"/> Baby Puppy (Monday)	<input type="checkbox"/> Owner-Handler Competition (Monday)
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Veterans (Monday)	
<input type="checkbox"/> Bred by Exhibitor	<input type="checkbox"/> Brace (Friday)	
	<input type="checkbox"/> Exhibition Only	

Reg. Name of Dog \_\_\_\_\_

Check One – and – Enter Number here	Date of Birth	Is this a puppy?
<input type="checkbox"/> CKC Reg. No.	D _____ M _____ Y _____	YES ___ NO ___
<input type="checkbox"/> CKC ERN No.		
<input type="checkbox"/> CKC Misc. Cert. No.		
<input type="checkbox"/> Listed		Place of Birth
		<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere

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

Sire \_\_\_\_\_

Dam \_\_\_\_\_

Reg'd Owner(s) \_\_\_\_\_

Owner's Address \_\_\_\_\_

City	Prov.	Code
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Name of Owner's Agent (if any)  
at the Show \_\_\_\_\_

Agent's Address _____	City	Prov.	Code
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Mail I.D. to  Owner or  Agent Email \_\_\_\_\_

**FAX/CREDIT CARD ENTRIES**

Amer Express  Mastercard  VISA Card No. \_\_\_\_\_ Expiry \_\_\_\_\_

Name of Cardholder \_\_\_\_\_ Signature \_\_\_\_\_

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 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 and regulations appearing in the premium list. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_