CANADIAN KENNEL CLUB
OFFICIAL ENTRY FORM
(Rally Obedience Trial)

September 17, 2021 **September 18, 2021**

TRIAL # 1 ____ TRIAL # 2 ____ TRIAL # 3 ___ TRIAL # 4 _____

ENTRIES CLOSE 8:00PM Wednesday SEPTEMBER 1, 2021

Mail to Jim Randall, 6529 2nd Line—RR 3 Fergus, ON, N1M 2W4

Online: www.dogshow.ca

Name of Club: **German Shepherd Dog Club of Canada**

Date(s) (Shows) Entered: _____

EVENT INFORMATION

FEES: **Entry Fee** $ _____ **TCN FEE** $ _____

Catalogue $ _____ **Total Enclosed** $ _____

CLASSES ENTERED

- ☐ Rally Novice A
- ☐ Rally Advanced A
- ☐ Rally Excellent A
- ☐ Rally Novice B
- ☐ Rally Advanced B
- ☐ Rally Excellent B
- ☐ Rally Intermediate
- ☐ Master
- ☐ Exhibition Only
- ☐ Unofficial _____

Jumps: Height: _____ Width: _____

DOG INFORMATION

Registered Name of Dog: _____

Breed: _____ Male ☐ Female ☐

- ☐ CKC Registration #
- ☐ CKC ERN #
- ☐ CKC PEN #
- ☐ CKC Miscellaneous #
- ☐ TCN #
- ☐ CKC CCN #

Insert Number Here: _____

Date of Birth: _____ (dd mm yy) Place of Birth: ☐ Canada ☐ Elsewhere

Breeder: _____

Sire: _____

Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s): _____ Membership No. _____

_____ Membership No. _____

_____ Membership No. _____

Owner's Address: _____

Name of Agent/Handler: _____

Agent's Address: _____ Street Address _____ City _____ Prov. _____ Postal Code

Mail To: Owner ☐ Agent ☐

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual owner(s) whose name(s) I have entered above and accept full responsibility for all statements

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual 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.

_____ Signature of Owner or Agent

( ) _____ Telephone Number

_____ Email