 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">Halifax Kennel Club</h2>	Administrative use only
--	-------------------------

<input type="checkbox"/> Show 1	Entry fees: ___ x \$23.00 = _____	
<input type="checkbox"/> Show 2	Listing Fees: ___ x \$ 8.40 = _____	
<input type="checkbox"/> Show 3	Ex. Only: ___ x \$ 7.00 = _____	
	Catalog: ___ x \$ 7.00 = _____	
<input type="checkbox"/> Catalog	Total: _____	

Please Print or type CLEARLY

Enter in one only of the following classes

CONFORMATION

<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 Month	<input type="checkbox"/> Specials Only
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only

BREED	VARIETY	SEX
--------------	----------------	------------

NAME OF DOG		
Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed	Date Of Birth _____ <small>Day Month Year</small>	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ USA

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------

AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------


Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
-----------------------------------	--------------------

___ VISA ___ Mastercard Card No: _____

Nome of cardholder _____ Expiry Date ___/___

 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">Halifax Kennel Club</h2>	Administrative use only
--	-------------------------

<input type="checkbox"/> Show 1	Entry fees: ___ x \$23.00 = _____	
<input type="checkbox"/> Show 2	Listing Fees: ___ x \$ 8.40 = _____	
<input type="checkbox"/> Show 3	Ex. Only: ___ x \$ 7.00 = _____	
	Catalog: ___ x \$ 7.00 = _____	
<input type="checkbox"/> Catalog	Total: _____	

Please Print or type CLEARLY

Enter in one only of the following classes

CONFORMATION

<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 Month	<input type="checkbox"/> Specials Only
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only

BREED	VARIETY	SEX
--------------	----------------	------------

NAME OF DOG		
Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed	Date Of Birth _____ <small>Day Month Year</small>	Is this a puppy? YES ___ NO ___ Place Of Birth ___ Canada ___ USA

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------

AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------


Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
-----------------------------------	--------------------

___ VISA ___ Mastercard Card No: _____

Nome of cardholder _____ Expiry Date ___/___

 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">Halifax Kennel Club</h2>	Administrative use only
--	-------------------------

<input type="checkbox"/> Obed Trial 1(Sat)	<input type="checkbox"/> Rally Trial 1 (Mon)	Entry fees: ___ x \$23.00 = _____
<input type="checkbox"/> Obed Trial 2 (Sun)	<input type="checkbox"/> Rally Trial 2 (Mon)	Listing Fees: ___ x \$ 8.40 = _____
<input type="checkbox"/> Obed Trial 3(Mon)		Ex. Only: ___ x \$ 7.00 = _____
Use separate entry forms for Obedience and Rally		Catalog: ___ x \$ 7.00 = _____
<input type="checkbox"/> Catalog		Total: _____

Please Print or type CLEARLY

Enter in one only of the following classes				RALLY OBEDIENCE
<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Novice A	<input type="checkbox"/> Excellent A	
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent B	
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Advanced A		
<input type="checkbox"/> Open B	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Advanced B	Rally Jump Height _____	
<input type="checkbox"/> Utility	Jump Height _____			

BREED	VARIETY	SEX
--------------	----------------	------------

NAME OF DOG		
Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed	Date Of Birth _____ Day Month Year	Is this a puppy? YES ___ NO ___
Place Of Birth ___ Canada ___ USA		

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------

AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------


Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
-----------------------------------	--------------------

___ VISA ___ Mastercard Card No: _____

Name of cardholder _____ Expiry Date ___/___

 <p>Official Canadian Kennel Club Entry Form</p> <h2 style="margin: 0;">Halifax Kennel Club</h2>	Administrative use only
--	-------------------------

<input type="checkbox"/> Obed Trial 1 (Sat)	<input type="checkbox"/> Rally Trial 1 (Mon)	Entry fees: ___ x \$23.00 = _____
<input type="checkbox"/> Obed Trial 2 (Sun)	<input type="checkbox"/> Rally Trial 2 (Mon)	Listing Fees: ___ x \$ 8.40 = _____
<input type="checkbox"/> Obed Trial 3 (Mon)		Ex. Only: ___ x \$ 7.00 = _____
Use separate entry forms for Obedience and Rally		Catalog: ___ x \$ 7.00 = _____
<input type="checkbox"/> Catalog		Total: _____

Please Print or type CLEARLY

Enter in one only of the following classes				RALLY OBEDIENCE
<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre-Novice	<input type="checkbox"/> Novice A	<input type="checkbox"/> Excellent A	
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice C	<input type="checkbox"/> Novice B	<input type="checkbox"/> Excellent B	
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice Int.	<input type="checkbox"/> Advanced A		
<input type="checkbox"/> Open B	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Advanced B	Rally Jump Height _____	
<input type="checkbox"/> Utility	Jump Height _____			

BREED	VARIETY	SEX
--------------	----------------	------------

NAME OF DOG		
Check one & enter Reg # here <input type="checkbox"/> CKC Reg # _____ <input type="checkbox"/> CKC ERN # _____ <input type="checkbox"/> CKC MSC # _____ <input type="checkbox"/> Listed	Date Of Birth _____ Day Month Year	Is this a puppy? YES ___ NO ___
Place Of Birth ___ Canada ___ USA		

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------

AGENT NAME

AGENT ADDRESS

CITY	PROV	POST CODE
-------------	-------------	------------------

Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 Federation of Canada 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, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____	Phone Number _____
-----------------------------------	--------------------

___ VISA ___ Mastercard Card No: _____

Name of cardholder _____ Expiry Date ___/___