CANINE GOOD NEIGHBOUR PROGRAM

ORDER FORM

Ordered By _____ **Name of Sponsoring Organization** _____

Address/Postal Code _____

Telephone Number _____ **E-mail Address** _____

Test Date _____ **Test Location** _____

DESCRIPTION	ITEM NO.	QUANTITY REQUIRED	UNIT COST	TOTAL COST
Participant Handbook	303-26-17		10.15	
Evaluator Guide	303-26-07		10.15	
Brochure - English (Describes the CGN test)	303-11-05		N/C	0.00
Brochure - French (Describes the CGN test)	303-11-06		N/C	0.00
Registration/Evaluation Forms155-26-71 (25 per set)	155-26-71		25.40 set	
Order Form	155-26-70		N/C	0.00
Poster (Used to promote your test)	155-26-72		7.10	
Crest with Logo	464-03-00		5.10	
Test Kit for 25 Dogs *(Includes 1 set of Registration/Evaluation Forms, 2 Posters, 1 Participant Handbook, 1 Evaluator Guide)*	155-26-75		45.70	
Test Kit for 50 Dogs *(Includes 2 sets of Registration/Evaluation Forms, 3 Posters, 1 Participants Handbook, 1 Evaluators Guide)*	155-26-76		81.20	
Test Kit for 75 Dogs *(Includes 3 sets of Registration/Evaluation Forms, 4 Posters, 2 Participant Handbooks, 2 Evaluator Guides)*	155-26-77		116.75	
Test Kit for 100 Dogs *(Includes 4 sets of Registration/Evaluation Forms, 5 Posters, 2 Participant Handbooks, 2 Evaluator Guides)*	155-26-78		152.25	

Instructions

- Payment to be made payable to The Canadian Kennel Club in Canadian dollars.
- Allow 2 - 6 weeks for delivery.
- Send completed Order Form along with cheque, money order or credit card information to:

THE CANADIAN KENNEL CLUB
Canine Good Neighbour Program
200 Ronson Drive, Suite 400
Etobicoke, ON M9W 5Z9
Order Desk: 1-800-250-8040
Fax: (416) 675-6506

- Declined Cheques/Declined Credit Cards – A service charge of $30.00 will be levied on all cheques and credit cards declined by the bank.

Method of Payment

☐ Cheque
☐ Money Order
☐ VISA
☐ MasterCard

Subtotal =
GST (5% of Subtotal) =
Total Amount Enclosed =

Credit Card Number _____ Exp. _____

Clearly Print Cardholder name

Authorized Cardholder Signature