



CANADIAN KENNEL CLUB CLUB CANIN CANADIEN

200 RONSON DRIVE, SUITE 400, ETOBICOKE, ON M9W 5Z9 TEL/TÉL (416) 675-5511 FAX/TÉLÉCOPIEUR (416) 675-6506

EVENT DATE APPLICATION Trials & Tests

Instructions

- Form to be typed or printed in ink.
- All signatures to be written in ink and not printed.
- A letter of consent is required from the all-breed club for events held in conjunction with an all-breed club.
- Please ensure that all sections are completed.
- Incomplete applications will be returned.
- Application to be received a minimum of 180 days prior to the event.

Name of Club _____

Club Number _____

Type of Event	# of Events/Day	Dates	Classes & Stakes (When Applicable)
Agility Trial			
Beagle Field Trial			
Draft Dog Test			
Earth Dog Test			
Field Trial Conformation Show			
Herding Trial			
Lure Coursing			
Pointing Field Dog Test			
Pointing Field Trial			
Retriever Field Trial			
Retriever Field Trial			
Retriever Hunt Test			
Retriever Hunt Test			
Spaniel Field Trial			
Spaniel Hunt Test			
Spaniel Water Test			
Tracking Test			
Working Certificate Test			
Working Certificate Test			
Other:			

For Office Use Only

BREEDS & VENUE

Breeds: _____

Location of Event: _____ Address _____ Indoor Outdoor Both

City/Town/Conservation Area _____ Province _____ Postal Code _____

Event held in conjunction with: _____ (name of all-breed club) (Attach letter of consent)

Agility Trial-Venue (provide dimensions and course surface): _____

OFFICIALS

Event Secretary: _____ CKC Membership No: _____

Address: _____ E-mail: _____

Event Superintendent: _____ CKC Membership No: _____

President: _____ CKC Membership No: _____

Vice President: _____ CKC Membership No: _____

Secretary: _____ CKC Membership No: _____

Treasurer: _____ CKC Membership No: _____

Date _____

Name and Title of Club Officer or Event Secretary _____

Signature of Club Officer or Event Secretary _____

Date Received _____

Reference Number _____

Date Approved _____

Approved by CKC _____