



CANADIAN KENNEL CLUB

CLUB CANIN CANADIEN

200 RONSON DRIVE, SUITE 400, ETOBICOKE, ONTARIO M9W 5Z9 TEL./TÉL. (416) 675-5511 FAX/TÉLÉCOUPEUR (416) 675-6506 E-MAIL: information@ckc.ca

STATEMENT OF EVENT FEES

FOR AGILITY TRIALS ONLY

BEING HELD JANUARY 1 TO DECEMBER 31 2019

INSTRUCTIONS:

- This form is to be completed and signed by the Trial Secretary and/or an Authorized Signing Officer of the club.
All signatures to be in ink and not printed.
PAYMENT IN FULL MUST ACCOMPANY THE RESULTS AND THIS STATEMENT WHEN SUBMITTED TO CKC.
A separate statement must be completed for each event number.
This form is NOT to be used for Canine Good Neighbour Tests.
Results for events held in conjunction will be invoiced to the club as indicated on the Event Date Application.

Note: If a dog is entered more than once in a trial (two entries in official classes/stakes) this will be counted as two paid entries.

NAME OF CLUB:

CLUB NO:

DATE OF EVENT:

EVENT APPLICATION NO.:

TYPE OF EVENT:

Table with 4 columns: Number of Entries, Type of Entry, Fee, Subtotals. Rows include All Dogs Entered, Number of dogs with a CCN entered, and Listed Dogs.

Table with 2 columns: Fees, Sub Total. Rows include Per entry per event (\$4.70) and Listed Dogs (\$10.00).

For non-participating provinces: (QC, MB, AB, SK, BC, YK) 5% GST
For participating provinces: (ON) 13% HST, (NS, NL, NB, PEI) 15% HST
TOTAL \$

I hereby certify that the information contained in the statement is correct.

Signature of Event Secretary

Signature of Authorized Signing Officer

Title of Authorized Signing Officer