

**STATEMENT OF EVENT FEES**

2022

**\*\*FOR EVENTS BEING HELD BETWEEN JANUARY 1 & DECEMBER 31\*\***  
 (WITH THE EXCEPTION OF AGILITY TRIALS)

**INSTRUCTIONS:**

- This form is to be completed and signed by the Event 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 at one event (two entries in official classes/stakes) this will be counted as two paid entries. For example, if a dog is entered in Open B and Utility in Obedience or when a dog is entered in Open and Amateur in Retriever Field Trials, two separate recording fees must be submitted.

NAME OF CLUB:

CLUB NO:

DATE OF EVENT:

EVENT APPLICATION NO.:

TYPE OF EVENT:

Number of Entries	Type of Entry	Fee	Subtotals
_____	All Dogs Entered (excluding 3 – 6 mth puppies) (including Altered & all regular Specialty classes)	@ \$ _____	\$ _____
_____	Number of dogs with a CCN entered (these dogs must also be included in All Dogs Entered)	*(if applicable)	
_____	Dogs with Temporary Competition Numbers	@ \$ 10.00 per dog	_____
_____	All Baby Puppies (3 to 6 months)	@ \$ 2.00 per dog	_____

Fees	Sub Total
Per entry per event where total entry is 125 dogs and under	\$ 4.70
Per entry per event where total entry is 126 and over	\$ 6.00*
Temporary Competition Number Dogs	\$10.00
Baby Puppies—4 to 6 mths	\$ 2.00
For non-participating provinces : (QC, MB, AB, SK, BC, YK) 5% GST	
For participating provinces: (ON) 13% HST	
(NS, NL, NB, PEI) 15% HST	
<b>TOTAL</b>	
\$ _____	

\*Please note that all Conformation Limited Breed Shows must pay the recording fee of total entry is 126 and over.

**TO BE COMPLETED ONLY IF THE ABOVE-NOTED EVENT WAS HELD IN CONJUNCTION WITH A HOST CLUB**  
 (The information must match what was indicated on the Event Date Application for billing.)

Name of Host Club:

Host Club Number:

Name of club to be invoiced for these event results:

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

Signature of Event Secretary

Signature of Authorized Signing Officer

102-151-00-52 (12/2021)

Title of Authorized Signing Officer