



**EVENT DATE APPLICATION**  
**Conformation, Obedience & Rally Obedience**

**Instructions**

- All required sections of the application must be complete.
- The application must be signed.
- A letter of consent is required from the all-breed club for specialty events held in conjunction with an all-breed club.
- Incomplete applications will be returned.
- Application to be received a minimum of 180 days prior to the event.

Name of Club \_\_\_\_\_ Club Number \_\_\_\_\_

EVENTS	Type of Event	# of Events/Day	Dates
	All Breed Conformation Show		
	Specialty Conformation Show		
	Group Specialty Conformation Show		
	Field Trial Conformation Show		
	Multiple Shows on Same Date		
	Limited Breed Show - Conformation		
	Junior Handling - Conformation		
	Junior Handling - Obedience		
	All Breed Obedience Trial		
	Specialty Obedience Trial		
	All Breed Rally Obedience Trial		
	Specialty Rally Obedience Trial		
	Canadian National Owner Handled Series		
	Sweepstakes		
Attractions and Demonstrations			
Other			
Unofficial/Non-Regular Classes		(PLEASE LIST THE CLASSES HERE)	

Breeds (Conformation): \_\_\_\_\_ Breeds (Obedience): \_\_\_\_\_  
List individual breeds only when the event does not include all breeds

National Specialty:  Yes  No Obedience  Limited Trial(s)  Unlimited Trial(s) Canine Companion Dogs (CCN):  Yes  No  
(Obedience & Rally Obedience)  
 Rally  Limited Trial(s)  Unlimited Trial(s)

Breeds Excluded (if applicable): \_\_\_\_\_

Name of Venue: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Specialty Event held in conjunction with: \_\_\_\_\_ (Attach letter of consent)  
(Name of All-Breed Club)

Conformation:  Indoor  Outdoor Obedience:  Indoor  Outdoor Club to be invoiced:  All-Breed  Specialty

**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 \_\_\_\_\_

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Date Received \_\_\_\_\_ Reference Number \_\_\_\_\_ Date Approved \_\_\_\_\_ Approved by CKC \_\_\_\_\_