



# CANADIAN KENNEL CLUB

## OFFICIAL ENTRY FORM

### (Draft Dog Test)

Name of Club: \_\_\_\_\_

#### EVENT INFORMATION

FEES: Entry Fee \$ \_\_\_\_\_ Listing Fee \$ \_\_\_\_\_ Total Enclosed \$ \_\_\_\_\_

#### LEVEL ENTERED:

DATE (Test 1)	DATE (Test 2)	DATE (Test 3)
<input type="checkbox"/> Novice Draft Dog <input type="checkbox"/> Draft Dog <input type="checkbox"/> Draft Dog Excellent <input type="checkbox"/> Brace Draft Dog <input type="checkbox"/> Brace Draft Dog Excellent	<input type="checkbox"/> Novice Draft Dog <input type="checkbox"/> Draft Dog <input type="checkbox"/> Draft Dog Excellent <input type="checkbox"/> Brace Draft Dog <input type="checkbox"/> Brace Draft Dog Excellent	<input type="checkbox"/> Novice Draft Dog <input type="checkbox"/> Draft Dog <input type="checkbox"/> Draft Dog Excellent <input type="checkbox"/> Brace Draft Dog <input type="checkbox"/> Brace Draft Dog Excellent
Is this for Requalification? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is this for Requalification? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is this for Requalification? <input type="checkbox"/> YES <input type="checkbox"/> NO

#### DOG INFORMATION

Registered Name of Dog: \_\_\_\_\_

Breed: \_\_\_\_\_ Call Name: \_\_\_\_\_ Male  Female

CKC Registration #     CKC Miscellaneous #  
 CKC ERN #             Listed  
 CKC PEN #

Insert Number Here: \_\_\_\_\_

Date of Birth:    dd    mm    yy    Place of Birth:  Canada  Elsewhere

Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

#### OWNER(S) & AGENT INFORMATION

Registered Owner(s): \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_

Handler: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Name of Agent (if any): \_\_\_\_\_

Agent's Address: \_\_\_\_\_  
 Street Address                      City                      Prov.                      Postal Code

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry. In consideration of the acceptance of this entry, I (we) agree to be bound by the rules and regulations of The Canadian Kennel Club and by any additional rules and regulations appearing in the premium list.

\_\_\_\_\_  
 Signature of Owner or Agent                      (    )                      Telephone Number                      Email



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Registered Owner(s): \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_  
 \_\_\_\_\_ Membership No. \_\_\_\_\_

Handler: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Name of Agent (if any): \_\_\_\_\_

Agent's Address: \_\_\_\_\_  
 Street Address                      City                      Prov.                      Postal Code

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