



OFFICIAL ENTRY FORM (Agility)

Name of Club: _____
Address of Venue: _____

EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____ Non-Member Fee \$ _____ Total Enclosed \$ _____

CLASSES:	<input type="checkbox"/> Standard	<input type="checkbox"/> Jumpers With Weaves	<input type="checkbox"/> Veterans	<input type="checkbox"/> Points & Distance
	<input type="checkbox"/> Selected Standard	<input type="checkbox"/> Selected Jumpers With Weaves	<input type="checkbox"/> Veterans Jumpers With Weaves	<input type="checkbox"/> Steeplechase

<input type="checkbox"/> Trial 1	<input type="checkbox"/> Trial 2	<input type="checkbox"/> Trial 3	<input type="checkbox"/> Trial 4
Date: _____	Date: _____	Date: _____	Date: _____
<input type="checkbox"/> Novice <input type="checkbox"/> Intermediate <input type="checkbox"/> Excellent <input type="checkbox"/> Master Excellent	<input type="checkbox"/> Novice <input type="checkbox"/> Intermediate <input type="checkbox"/> Excellent <input type="checkbox"/> Master Excellent	<input type="checkbox"/> Novice <input type="checkbox"/> Intermediate <input type="checkbox"/> Excellent <input type="checkbox"/> Master Excellent	<input type="checkbox"/> Novice <input type="checkbox"/> Intermediate <input type="checkbox"/> Excellent <input type="checkbox"/> Master Excellent

Dogs Height Jump Height: 4 8 12 16 20 24

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male Female

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

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: _____

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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