



OFFICIAL ENTRY FORM (Beagle Field Trial)

Name of Club: _____

Date of Event: _____

EVENT INFORMATION

FEES: Entry Fee \$ _____ TCN Fee \$ _____ Total Enclosed \$ _____

CLASSES ENTERED

Male Female 13" 15"

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

CKC Registration # CKC PEN # Insert Number Here: _____

CKC ERN # CKC TCN #

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. _____

Handler: _____ 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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