



CANADIAN KENNEL CLUB

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OFFICIAL ENTRY FORM

Scent Detection Trial

Saturday, September 14, 2019

WASCANA DOG OBEDIENCE CLUB

MAIL TO or DROP OFF: Jill Cairns 2222 Garnet St. Regina, SK S4T 2Z9

#### EVENT INFORMATION

Total: Entry Fee: \$ \_\_\_\_\_ Listing Fee: \$ \_\_\_\_\_ Catalogue: \$ \_\_\_\_\_

Breed: \_\_\_\_\_ Variety: \_\_\_\_\_ Sex: \_\_\_\_\_

Enter in the following class and component:

INSTINCT

NOVICE

OPEN

CONTAINER

CONTAINER

INTERIOR

INTERIOR

EXTERIOR

EXTERIOR

#### DOG INFORMATION

|                                  |   |  |                                    |
|----------------------------------|---|--|------------------------------------|
| Registered Name of Dog:          |   | Call Name:                                   |                                    |
| Date of Birth:<br>(dd/mm/yyyy)   | Place of Birth:<br><input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere |  |                                    |
| Breeder:                         |   |  |                                    |
| Sire:                            |   |  |                                    |
| Dam:                             |   |  |                                    |
| CHECK ONE AND ENTER NUMBER HERE: |   | <input type="checkbox"/> CKC REGISTRATION #  | <input type="checkbox"/> CKC ERN # |
| NUMBER: _____                    |   | <input type="checkbox"/> CKC ERN #           | <input type="checkbox"/> TCN       |
|                                  |   | <input type="checkbox"/> CKC PEN #           | <input type="checkbox"/> CCN       |
|                                  |   | <input type="checkbox"/> CKC MISCELLANEOUS # |                                    |

#### OWNER(S) AND AGENT INFORMATION

Registered Owner(s): \_\_\_\_\_ Membership # \_\_\_\_\_  
\_\_\_\_\_ Membership # \_\_\_\_\_  
\_\_\_\_\_ Membership # \_\_\_\_\_

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

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

Agent's Address: \_\_\_\_\_

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 names 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