

		Official Canadian Kennel Club Entry Form MARITIME GROUP 7 CLUB Scent Detection Trial April 24, 2021		Administrative use only
<input type="checkbox"/> Trial 1		Component: ___ x \$ 30.00 = _____ All 3 Components: \$ 75.00 = _____ Listing Fees: ___ x \$ 11.50 = _____ Instinct Test: ___ x \$ 25.00 = _____ Ex. Only: ___ x \$ 10.00 = _____ Catalogue: ___ x \$ 5.00 = _____ Total: _____		
Please Print or type CLEARLY (ONE DOG PER ENTRY)				
Enter in one only of the following classes				
CLASS <input type="checkbox"/> Instinct <input type="checkbox"/> Novice <input type="checkbox"/> Open <input type="checkbox"/> Excellent <input type="checkbox"/> Master				
COMPONENT		SIZE DIVISION		
<input type="checkbox"/> Container		<input type="checkbox"/> Small (less than 13 inches)		
<input type="checkbox"/> Interior		<input type="checkbox"/> Medium (13 inches to less than 20 inches)		
<input type="checkbox"/> Exterior		<input type="checkbox"/> Large (20 inches and above)		
BREED		VARIETY	SEX	
NAME OF DOG				
Check one & enter Reg # here		Date of Birth		Is this a puppy?
<input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC TCN # <input type="checkbox"/> CKC CCN #		Day Month Year _____		YES ___ NO ___
		Place of Birth ___ Canada ___ Elsewhere		
BREEDER				
SIRE				
DAM				
REG. OWNER				
OWNER ADDRESS				
CITY		PROV	POSTAL CODE	
AGENT NAME				
AGENT ADDRESS				
CITY		PROV	POSTAL CODE	
Mail ID to: ___ OWNER or ___ AGENT				
*EMAIL				
I CERTIFY that I am the registered owner(s) of this dog or that I am the authorized agent of the 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. Also, by signing this form I certify that I will not hold the Show giving Club, its members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.				
Signature of Agent or Owner			Phone Number	

		Official Canadian Kennel Club Entry Form MARITIME GROUP 7 CLUB Scent Detection Trial April 25, 2021		Administrative use only
<input type="checkbox"/> Trial 2		Component: ___ x \$ 30.00 = _____ All 3 Components: \$ 75.00 = _____ Listing Fees: ___ x \$ 11.50 = _____ Instinct Test: ___ x \$ 25.00 = _____ Ex. Only: ___ x \$ 10.00 = _____ Catalogue: ___ x \$ 5.00 = _____ Total: _____		
Please Print or type CLEARLY (ONE DOG PER ENTRY)				
Enter in one only of the following classes				
CLASS <input type="checkbox"/> Instinct <input type="checkbox"/> Novice <input type="checkbox"/> Open <input type="checkbox"/> Excellent <input type="checkbox"/> Master				
COMPONENT		SIZE DIVISION		
<input type="checkbox"/> Container		<input type="checkbox"/> Small (less than 13 inches)		
<input type="checkbox"/> Interior		<input type="checkbox"/> Medium (13 inches to less than 20 inches)		
<input type="checkbox"/> Exterior		<input type="checkbox"/> Large (20 inches and above)		
BREED		VARIETY	SEX	
NAME OF DOG				
Check one & enter Reg # here		Date of Birth		Is this a puppy?
<input type="checkbox"/> CKC Reg # <input type="checkbox"/> CKC ERN # <input type="checkbox"/> CKC MSC # <input type="checkbox"/> CKC PEN # <input type="checkbox"/> CKC TCN # <input type="checkbox"/> CKC CCN #		Day Month Year _____		YES ___ NO ___
		Place of Birth ___ Canada ___ Elsewhere		
BREEDER				
SIRE				
DAM				
REG. OWNER				
OWNER ADDRESS				
CITY		PROV	POSTAL CODE	
AGENT NAME				
AGENT ADDRESS				
CITY		PROV	POSTAL CODE	
Mail ID to: ___ OWNER or ___ AGENT				
*EMAIL				
I CERTIFY that I am the registered owner(s) of this dog or that I am the authorized agent of the 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. Also, by signing this form I certify that I will not hold the Show giving Club, its members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.				
Signature of Agent or Owner			Phone Number	