



OFFICIAL ENTRY FORM CONFORMATION
Calgary Kennel & Obedience Club – May 2024
 FRIDAY SATURDAY SUNDAY

I ENCLOSE _____ FOR ENTRY FEES _____ FOR LISTING FEES _____
 Please type or print clearly Catalogue \$15.00

| Breed | Variety | Sex |
|---|--|---|
| Enter in the following OFFICIAL events: | UNOFFICIAL EVENT | Sweepstakes THURSDAY |
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> BABY Puppy |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Open | <input type="checkbox"/> VETERAN |
| <input type="checkbox"/> 12-18 Month | <input type="checkbox"/> Specials Only | <input type="checkbox"/> BRACE |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Exhibition Only | |
| | | <input type="checkbox"/> 4 – 6 months |
| | | <input type="checkbox"/> 6 – 9 months |
| | | <input type="checkbox"/> 9-12 months |
| | | <input type="checkbox"/> 12 – 18 months |
| | | <input type="checkbox"/> Veteran Sweeps 7-10rs |
| | | <input type="checkbox"/> Veteran Sweeps 10+ yrs |

Reg'd Name _____
 of Dog _____

Check One - and - Enter Number here | Date of Birth | Is this a Puppy?
 CKC Reg. | D M Y | YES NO
 CKC ERN No.
 CKC Misc. Cert. No. Place of Birth
 TCN No. Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____ | Prov. _____ | Postal Code _____

Name of Owner's Agent (if any) at the Show _____

Agent's Address _____

City _____ | Prov. _____ | Postal Code _____

IDs will not be mailed – please supply email address below for entry confirmation

Visa ___ Mastercard ___ Am Express ___
 Card No. _____ Expiry ____/____
 Name of Card Holder: _____

I CERTIFY that I am the registered owner(s) of the 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.

SIGNATURE OF OWNER OR AGENT TELEPHONE NUMBER

E-mail _____ Please print clearly



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 of Dog _____

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Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____ | Prov. _____ | Postal Code _____

Name of Owner's Agent (if any) at the Show _____

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Calgary Kennel & Obedience Club – May 2024

 FRI (Trial #1) SAT (Trial #3) SUN (Trial #5) FRI (Trial #2) SAT (Trial #4) SUN (Trial #6)

I ENCLOSE _____ FOR ENTRY FEES _____ FOR TCN FEES _____

Please type or print clearly Catalogue \$15.00

Breed _____ |Variety _____ |Sex _____

Enter in the following **Official Events:**

| | | | | |
|------------------------------------|--|--|---------------------------------|---------------|
| <input type="checkbox"/> PreNovice | <input type="checkbox"/> Novice Intermediate | <input type="checkbox"/> Open B(18) | <input type="checkbox"/> *Brace | JUMPS: |
| <input type="checkbox"/> Novice A | <input type="checkbox"/> Open A(H) | <input type="checkbox"/> Utility A | <input type="checkbox"/> *Team | Height _____ |
| <input type="checkbox"/> Novice B | <input type="checkbox"/> Open B(H) | <input type="checkbox"/> Utility B | | Width _____ |
| <input type="checkbox"/> Novice C | <input type="checkbox"/> Open A(18) | <input type="checkbox"/> Exhibition Only | | |

PLEASE USE ONLY ONE FORM WHEN DOGS ARE ENTERED IN 2 CLASSESReg'd. Name
of Dog:

Check one - and - Enter Number here

 CKC Reg. No. _____ |Date of Birth _____ CKC ERN No. _____ |D _____ M _____ Y _____ CKC Misc. Cert. No. _____ |Place of Birth _____ CCN TCN CKC PEN No. _____ |Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd owner(s) _____

Owner's Address _____

City _____ |Prov. _____ |Postal Code _____

Name of Owner's Agent (if any) at the show _____

Agent's Address _____

City _____ |Prov. _____ |Postal Code _____

IDs will not be mailed – please supply email address below for entry confirmation

Visa ___ Mastercard ___ Am Express ___

Card No. _____ Expiry ____/____

Name of Card Holder: _____

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SIGNATURE OF OWNER OR AGENT

TELEPHONE NUMBER

E-mail _____ Please print clearly



Calgary Kennel & Obedience Club – May 2024

 FRI (Trial #1) SAT (Trial #3) SUN (Trial #5) FRI (Trial #2) SAT (Trial #4) SUN (Trial #6)

I ENCLOSE _____ FOR ENTRY FEES _____ FOR TCN FEES _____

Please type or print clearly Catalogue \$15.00

Breed _____ |Variety _____ |Sex _____

Enter in the following **Official Events:**

| | | | | |
|------------------------------------|--|--|---------------------------------|---------------|
| <input type="checkbox"/> PreNovice | <input type="checkbox"/> Novice Intermediate | <input type="checkbox"/> Open B(18) | <input type="checkbox"/> *Brace | JUMPS: |
| <input type="checkbox"/> Novice A | <input type="checkbox"/> Open A(H) | <input type="checkbox"/> Utility A | <input type="checkbox"/> *Team | Height _____ |
| <input type="checkbox"/> Novice B | <input type="checkbox"/> Open B(H) | <input type="checkbox"/> Utility B | | Width _____ |
| <input type="checkbox"/> Novice C | <input type="checkbox"/> Open A(18) | <input type="checkbox"/> Exhibition Only | | |

PLEASE USE ONLY ONE FORM WHEN DOGS ARE ENTERED IN 2 CLASSESReg'd. Name
of Dog:

Check one - and - Enter Number here

 CKC Reg. No. _____ |Date of Birth _____ CKC ERN No. _____ |D _____ M _____ Y _____ CKC Misc. Cert. No. _____ |Place of Birth _____ CCN TCN CKC PEN No. _____ |Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd owner(s) _____

Owner's Address _____

City _____ |Prov. _____ |Postal Code _____

Name of Owner's Agent (if any) at the show _____

Agent's Address _____

City _____ |Prov. _____ |Postal Code _____

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SIGNATURE OF OWNER OR AGENT

TELEPHONE NUMBER

E-mail _____ Please print clearly



OFFICIAL ENTRY FORM – RALLY OBEDIENCE
Calgary Kennel & Obedience Club – May 2024

- FRI (Trial #1) SAT (Trial #3) SUN (Trial #5)
 FRI (Trial #2) SAT (Trial #4) SUN (Trial #6) \$ Catalogue 15.00

I ENCLOSE _____ FOR ENTRY FEES _____ FOR TCN FEES _____

Please type or print clearly

| Breed | Variety | Sex |
|--|--------------------------------------|---|
| Enter in the following Official Events: | | |
| <input type="checkbox"/> Novice A | <input type="checkbox"/> Advanced B | <input type="checkbox"/> *Brace _____ (class) |
| <input type="checkbox"/> Novice B | <input type="checkbox"/> Excellent A | <input type="checkbox"/> *Team _____ (class) |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> Excellent B | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> Advanced A | <input type="checkbox"/> Master | |
| JUMPS: | | |
| | | Height _____ |
| | | Width _____ |

PLEASE USE ONLY ONE FORM WHEN DOGS ARE ENTERED IN 2 CLASSES

Reg'd. Name _____
of Dog: _____

Check one - and - Enter Number here _____ |Date of Birth _____

CKC Reg. No. _____ |D _____ M _____ Y _____

CKC ERN No. _____

CKC Misc. Cert. No. _____ |Place of Birth _____

TCN CKC PEN No. CCN Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd owner(s) _____

Owner's Address _____

City _____ | Prov. _____ |Postal Code _____

Name of Owner's Agent (if any) at the show _____

Agent's Address _____

City _____ | Prov. _____ |Postal Code _____

IDs will not be mailed – please supply email address below for entry confirmation

Visa ___ Mastercard ___ Am Express ___

Card No. _____ Expiry ____/____

Name of Card Holder: _____

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SIGNATURE OF OWNER OR AGENT _____ TELEPHONE NUMBER _____

E-mail _____ Please print clearly



OFFICIAL ENTRY FORM – RALLY OBEDIENCE
Calgary Kennel & Obedience Club – May 2024

- FRI (Trial #1) SAT (Trial #3) SUN (Trial #5)
 FRI (Trial #2) SAT (Trial #4) SUN (Trial #6) Catalogue \$15.00

I ENCLOSE _____ FOR ENTRY FEES _____ FOR TCN FEES _____

Please type or print clearly

| Breed | Variety | Sex |
|--|--------------------------------------|---|
| Enter in the following Official Events: | | |
| <input type="checkbox"/> Novice A | <input type="checkbox"/> Advanced B | <input type="checkbox"/> *Brace _____ (class) |
| <input type="checkbox"/> Novice B | <input type="checkbox"/> Excellent A | <input type="checkbox"/> *Team _____ (class) |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> Excellent B | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> Advanced A | <input type="checkbox"/> Master | |
| JUMPS: | | |
| | | Height _____ |
| | | Width _____ |

PLEASE USE ONLY ONE FORM WHEN DOGS ARE ENTERED IN 2 CLASSES

Reg'd. Name _____
of Dog: _____

Check one - and - Enter Number here _____ |Date of Birth _____

CKC Reg. No. _____ |D _____ M _____ Y _____

CKC ERN No. _____

CKC Misc. Cert. No. _____ |Place of Birth _____

TCN CKC PEN No. CCN Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd owner(s) _____

Owner's Address _____

City _____ | Prov. _____ |Postal Code _____

Name of Owner's Agent (if any) at the show _____

Agent's Address _____

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OFFICIAL ENTRY FORM CONFORMATION LIMITED BREED

Calgary Kennel & Obedience Club – May 2024

FRIDAY Group 1 SATURDAY Group 3 SUNDAY Group 7

I ENCLOSE _____ FOR ENTRY FEES _____ FOR LISTING FEES _____
Please type or print clearly Catalogue \$15.00

Breed _____ | Variety _____ | Sex _____

Enter in the following OFFICIAL events: UNOFFICIAL EVENT

- Junior Puppy Bred by Exhibitor VETERAN
- Senior Puppy Open
- 12-18 Month Specials Only
- Canadian Bred Exhibition Only

Reg'd Name _____
of Dog _____

Check One - and - Enter Number here | Date of Birth _____ | Is this a Puppy? _____

- CKC Reg. | D M Y | YES NO
- CKC ERN No.
- CKC Misc. Cert. No. Place of Birth
- TCN No. Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____ | Prov. _____ | Postal Code _____

Name of Owner's Agent (if any) at the Show _____

Agent's Address _____

City _____ | Prov. _____ | Postal Code _____

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Calgary Kennel & Obedience Club – May 2024

FRIDAY Group 1 SATURDAY Group 3 SUNDAY Group 7

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Reg'd Name _____
of Dog _____

Check One - and - Enter Number here | Date of Birth _____ | Is this a Puppy? _____

- CKC Reg. | D M Y | YES NO
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Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City _____ | Prov. _____ | Postal Code _____

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Agent's Address _____

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SIGNATURE OF OWNER OR AGENT

TELEPHONE NUMBER

E-mail _____ Please print clearly

CKOC MAY 11, 2024



**SANCTION MATCH
ENTRY FORM**

ARMBAND # : _____

MALE FEMALE

BREED _____

SEX

4 – 6 MONTH

DOG NAME _____

CLASS

6 - 9 MONTH

OWNER NAME _____

9 – 12 MONTHS

ADDRESS _____

OPEN

GRADUATE

PAID / INITIAL _____

ALTERED

CKOC MAY 11, 2024



**SANCTION MATCH
ENTRY FORM**

ARMBAND # : _____

MALE FEMALE

BREED _____

SEX

4 – 6 MONTH

DOG NAME _____

CLASS

6 - 9 MONTH

OWNER NAME _____

9 – 12 MONTHS

ADDRESS _____

OPEN

GRADUATE

PAID / INITIAL _____

ALTERED

CKOC MAY 11, 2024



**SANCTION MATCH
ENTRY FORM**

ARMBAND # : _____

MALE FEMALE

BREED _____

SEX

4 – 6 MONTH

DOG NAME _____

CLASS

6 - 9 MONTH

OWNER NAME _____

9 – 12 MONTHS

ADDRESS _____

OPEN

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ALTERED