



OFFICIAL CKC ENTRY FORM

2026 Canadian National Amateur Spaniel Field Trial Championship

Hosted by Eastern Slopes Spaniel Association

October 11 & 12, 2026 High River, AB

EVENT INFORMATION

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

Sunday, October 11, 2026

____ Amateur Stake - \$325.00

____ TCN Fee - \$10.50

Saturday, October 10, 2026 Banquet Tickets:

Must be purchased by September 16, 2026**\$60.00 per person**

No. of Tickets - _____



OFFICIAL CKC ENTRY FORM

2026 Canadian National Amateur Spaniel Field Trial Championship

Hosted by Eastern Slopes Spaniel Association

October 11 & 12, 2026 High River, AB

EVENT INFORMATION

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

Sunday, October 11, 2026

____ Amateur Stake - \$325.00

____ TCN Fee - \$10.50

Saturday, October 10, 2026 Banquet Tickets:

Must be purchased by September 16, 2026**\$60.00 per person**

No. of Tickets - _____

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male _____ Female _____

CKC Registration # _____ CKC Miscellaneous # _____

NUMBER:

CKC ERN # _____ TCN # _____

Date of Birth: _____ / _____ / _____
Day Month Year

Place of Birth Canada _____ Elsewhere _____

BREEDER(S)

SIRE

DAM

REG'D OWNER OR Lessee

OWNER'S ADDRESS or Lessee

Name of Handler

CREDIT CARD ENTRIES ONLY _____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____

CARD NO. _____ EXPIRY DATE _____ / _____

CARDHOLDER NAME (PLEASE PRINT) _____

I CERTIFY that I am the registered owner(s) of this dog, or that I am the duly authorized agent of the registered owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry. In consideration of acceptance of this entry, I (we) agree to abide by all the rules of the Canadian Kennel Club and the Standard Procedures governing this Field Trial and any directions made in accord with them, and I further agree that the dog is entered in and will be at this trial at my own risk and that I will hold the trial-giving club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at the trial.

Signature of Owner or Agent

Telephone Number

E-mail address _____

DOG INFORMATION

Registered Name of Dog: _____ Call Name: _____

Breed: _____ Male _____ Female _____

CKC Registration # _____ CKC Miscellaneous # _____

NUMBER:

CKC ERN # _____ TCN # _____

Date of Birth: _____ / _____ / _____
Day Month Year

Place of Birth Canada _____ Elsewhere _____

BREEDER(S)

SIRE

DAM

REG'D OWNER OR Lessee

OWNER'S ADDRESS or Lessee

Name of Handler

CREDIT CARD ENTRIES ONLY _____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS _____

CARD NO. _____ EXPIRY DATE _____ / _____

CARDHOLDER NAME (PLEASE PRINT) _____

I CERTIFY that I am the registered owner(s) of this dog, or that I am the duly authorized agent of the registered owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry. In consideration of acceptance of this entry, I (we) agree to abide by all the rules of the Canadian Kennel Club and the Standard Procedures governing this Field Trial and any directions made in accord with them, and I further agree that the dog is entered in and will be at this trial at my own risk and that I will hold the trial-giving club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at the trial.

Signature of Owner or Agent

Telephone Number

E-mail address _____