



## OFFICIAL CANADIAN KENNEL CLUB ENTRY FORM

**Dogwood Boxer Club  
Specialty Obedience Trial  
Friday, April 2, 2010**

**Entries Close: 12:00 Noon – Wednesday March 17, 2010**

Show Secretary: Louise Davie  
30886 Dewdney Trunk Rd., Mission BC V4S 1C4  
Phone: (604) 462-1365 Fax: (604) 484-6508

Entry Fees \$ \_\_\_\_\_ Listing Fees \$ \_\_\_\_\_ Catalogue \$ \_\_\_\_\_ P/F \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Breed: Boxer Colour [ ] Fawn [ ] Brindle Sex \_\_\_\_\_

Enter in the following class (es)

<input type="checkbox"/> Novice A	<input type="checkbox"/> Pre Novice	<input type="checkbox"/> Brace	Obedience Jumps
<input type="checkbox"/> Novice B	<input type="checkbox"/> Novice Intermediate	<input type="checkbox"/> Team	
<input type="checkbox"/> Open A	<input type="checkbox"/> Novice C	<input type="checkbox"/> Veterans	High _____ in
<input type="checkbox"/> Open B	<input type="checkbox"/> Exhibition Only		Broad _____ in
<input type="checkbox"/> Utility			

Reg. Name of Dog \_\_\_\_\_

Check one and enter number here	Date of Birth
<input type="checkbox"/> CKC Reg. No.	M _____ D _____ Y _____
<input type="checkbox"/> CKC ERN No.	
<input type="checkbox"/> CKC Misc. Cert No.	Is this a puppy? Y _____ N _____
<input type="checkbox"/> CKC PEN No.	Place of Birth Canada [ ] Elsewhere [ ]
<input type="checkbox"/> LISTED (No CKC/ERN No.)	

Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

Reg. Owner: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Owner's Agent: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mail to: [ ] Owner [ ] Agent

*I accept full responsibility for all statements made of this entry. I hereby certify that I understand the CKC rules and regulations, conditions and provisions in the Premium List for this show and agree to be bound by the same.*

Visa Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Mastercard Cardholder Name: (Print) \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Signature of Owner/Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Fax & Internet entries will be assessed a processing fee of \$3.00 per entry



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Breeder: \_\_\_\_\_

Sire: \_\_\_\_\_

Dam: \_\_\_\_\_

Reg. Owner: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Name of Owner's Agent: \_\_\_\_\_

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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