

OFFICIAL ENTRY FORM

(Pointing Field Trial)

Name of Club:			Brittany Spa	o.	D OI OIIIailo	
Trial Date(s):		May 28, 29, 2022			Cayuga, Ontario	
EVENT IN	NFORMATION					
	try Fee	\$	TCN # Fee	\$	Total Enclosed	\$
STAKES ENTERE	ED:		Saturday, May 28 FDJ \$65.00 FD \$65.00 FDA \$65.00 FDX \$65.00 FDCh \$65.00 TCN Fee \$11.30		Sunday, May 29FDJ \$65.00FD \$65.00FDA \$65.00FDX \$65.00FDCh \$65.00TCN Fee \$11.30)
DOG IN	FORMATION					
Registered Name	of Dog:				Call Name:	
Breed:					Male □	Female
			CKC Miscellaneous # TCN #	Insert Nun	mber Here:	
CKC ERN #			TCN#		nber Here:	here
CKC ERN #	!		TCN#			rhere
CKC ERN # r Date of Birth: Breeder: Sire:	t dd	уу	TCN#	ee of Birth:		rhere
CKC ERN # r Date of Birth: Breeder: Sire: OWNER & AGEN	mm dd	уу	TCN#	ee of Birth:		here
CKC ERN # r Date of Birth: Breeder: Sire: OWNER & AGEN Registered Owner	mm dd	уу	TCN#	ee of Birth:		rhere
CKC ERN # r Date of Birth: Breeder: Sire: OWNER & AGENT Registered Owners	mm dd	уу	TCN#	ee of Birth:		rhere Postal Code
CKC ERN # r Date of Birth: Breeder: Sire: OWNER & AGEN Registered Owner Owner's Address:	T INFORMATI	уу	TCN# Place	ee of Birth:] Canada □ Elsew	
CKC ERN # r Date of Birth: Breeder: Sire: OWNER & AGEN Registered Owner Owner's Address: Handler/Agent (if re	TINFORMATI (s):	уу	TCN# Place	ee of Birth:] Canada □ Elsew	
CKC ERN # r Date of Birth: Breeder: Sire: DWNIER & AGENT Registered Owner Owner's Address: Handler/Agent (if re	TINFORMATI (s):	yy ON	TCN# Place	ee of Birth:] Canada □ Elsew	Postal Code
CKC ERN #	TINFORMATII (s): mot Owner): ddress:		Place Date of the property of	ee of Birth:] Canada	

Telephone Number

Email

Signature of Owner or Agent



OFFICIAL ENTRY FORM (Pointing Field Trial)

Name of Club: Brittany Spaniel Club of Ontario

May 28, 29, 2022 Cayuga, Ontario Trial Date(s): **EVENT INFORMATION** FEES: **Entry Fee** TCN # Fee **Total Enclosed** STAKES ENTERED: Saturday, May 25 Sunday, May 26 FDJ \$65.00 FDJ \$65.00 FD \$65.00 ____ FD \$65.00 FDA \$65.00 FDA \$65.00 FDX \$65.00 FDX \$65.00 FDCh \$65.00 FDCh \$65.00 TCN Fee \$11.30 TCN Fee \$11.30 DOG INFORMATION Registered Name of Dog: Male □ Female Breed: CKC Registration # CKC Miscellaneous # Insert Number Here: CKC ERN# TCN# Date of Birth: Canada Elsewhere Breeder: Dam: OWNER & AGENT INFORMATION Registered Owner(s): Owner's Address: Street Address Prov. Postal Code Handler/Agent (if not Owner): Handler/Agent's Address: Street Address City Prov. Postal Code Are the Owner(s) and Handler Amateurs? Yes No 🗆 I CERTIFY that I am the registered owner of the dog or that I am the authorized agent of the actual 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. I (we) further agree that the dog entered is and will be at this trial at my (our) own risk and that I (we) will hold the trial giving club, its members, agents and landowners (Prairie Circle) free from liability for any claims arising out of the entry of the dog or my (our) presence at the trial. Signature of Owner or Agent Telephone Number Email