



OFFICIAL ENTRY FORM (Specialty Conformation Show)

Make fees payable to:
Chesapeake Bay Retriever Club of Canada
Mail to:
Best in Show Services - Joanne Fernall
1412 Webster Road
Norwood, Ontario K0L 2V0

Chesapeake Bay Retriever Club of Canada
National Specialty Show
September 4th, 2016

Name of Club: _____

Date(s) (Shows) Entered: _____

EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____
Catalogue \$ _____ Total Enclosed \$ _____

CLASSES ENTERED

- | | | |
|--|--|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Brace |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Open Class | <input type="checkbox"/> Gun Dog Class |
| <input type="checkbox"/> 12-18 Month | <input type="checkbox"/> Veterans Class | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> 12-15 Month | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Sweepstakes |
| <input type="checkbox"/> 15-18 Month | <input type="checkbox"/> Stud Dog | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Brood Bitch | |

DOG INFORMATION

Registered Name of Dog: _____

Breed: _____ Variety: _____ Male Female

CKC Registration # CKC Miscellaneous #
 CKC ERN # Listed Insert Number Here: _____

Date of Birth: dd mm yy Place of Birth: Canada Elsewhere Puppy: Yes No

Breeder: _____

Sire: _____

Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s) _____ Membership No _____
_____ Membership No _____
_____ Membership No _____

Owner's Address _____

Name of Agent/Handler _____

Agent's Address _____

Street Address City Prov Postal Code

Mail To: Owner Agent

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

Signature of Owner or Agent

Telephone Number

Email



OFFICIAL ENTRY FORM (Specialty Conformation Show)

Make fees payable to:
Chesapeake Bay Retriever Club of Canada
Mail to:
Best in Show Services - Joanne Fernall
1412 Webster Road
Norwood, Ontario K0L 2V0

Chesapeake Bay Retriever Club of Canada
National Specialty Show
September 4th, 2016

Name of Club: _____

Date(s) (Shows) Entered: _____

EVENT INFORMATION

FEES: Entry Fee \$ _____ Listing Fee \$ _____
Catalogue \$ _____ Total Enclosed \$ _____

CLASSES ENTERED

- | | | |
|--|--|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Brace |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Open Class | <input type="checkbox"/> Gun Dog Class |
| <input type="checkbox"/> 12-18 Month | <input type="checkbox"/> Veterans Class | <input type="checkbox"/> Exhibition Only |
| <input type="checkbox"/> 12-15 Month | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Sweepstakes |
| <input type="checkbox"/> 15-18 Month | <input type="checkbox"/> Stud Dog | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Brood Bitch | |

DOG INFORMATION

Registered Name of Dog: _____

Breed: _____ Variety: _____ Male Female

CKC Registration # CKC Miscellaneous #
 CKC ERN # Listed Insert Number Here: _____

Date of Birth: dd mm yy Place of Birth: Canada Elsewhere Puppy: Yes No

Breeder: _____

Sire: _____

Dam: _____

OWNER(S) & AGENT INFORMATION

Registered Owner(s) _____ Membership No _____
_____ Membership No _____
_____ Membership No _____

Owner's Address _____

Name of Agent/Handler _____

Agent's Address _____

Street Address City Prov Postal Code

Mail To: Owner Agent

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

Signature of Owner or Agent

Telephone Number

Email