

**If you wish to park with another party,
YOU MUST ENTER THE GROUNDS
TOGETHER**

**** DEADLINE FOR RESERVATIONS IS
FRIDAY AUGUST 12TH, 2016**

Name _____

Address _____

Phone (____) _____ e-mail _____

Days/nights (please check) Thur Fri Sat Sun Mon

No. of dogs being shown _____

Auto/Truck: Length _____

NEW VENUE

Trailer: Length _____ Width _____

Motorhome: Length _____ Width _____

Conformation Exhibitor Obedience Exhibitor

Overnight parking total \$ _____

Please remit the above form with cheque payable to The Kamloops and District Kennel Club; Credit Card Payments will be processed by JM Show Secretary Services

PARKING CLOSE: **FRIDAY, AUG. 12, 2016 @ 12 NOON PDT**

MAIL TO: JM SHOW SECRETARY SERVICES

P.O. BOX 825 STN MAIN, GRANDE PRAIRIE, ALBERTA T8V 3R5

PHONE: 780-532-9969 FAX: 1-877-99-ENTRY (36879)

mcmurphy@telusplanet.net • www.jmshowservices.com

***If you like us in 2016
you'll LOVE us in 2017***

**Kamloops & District
Kennel Club
Celebrates**

50 years in 2017

**Join us with:
Jim Reynolds
Paula Hartinger
Roger Hartinger
Ramon Podesta
(subject to CKC approval)**

**Entry fee:
\$15 per dog per day!**

**See our website for information and photos of our
new venue: <http://goto-hwl.com/KDKC.html>**



**KAMLOOPS & DISTRICT KENNEL CLUB
OFFICIAL CKC ENTRY FORM
CONFORMATION**



Friday Saturday Sunday Monday

Pre-paid Catalogue Juvenile Sweepstakes Owner/Handler:

Entry Fees: _____ Listing Fees: _____

<u>Conformation</u>		<u>Sweeps</u>
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> 12-18 months	<input type="checkbox"/> Jr Puppy
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Sr Puppy
<input type="checkbox"/> Can. Bred	<input type="checkbox"/> Specials Only	<input type="checkbox"/> 12-18 Puppy
<input type="checkbox"/> Bred BY	<input type="checkbox"/> Exhibition Only	

Please Print Clearly

Breed: _____ **Sex** _____

Registered Name of Dog _____

Enter number _____ Date of Birth D___/M___/Y___
 CKC Reg. No. Is this a puppy Yes___ No___
 CKC ERN No. Place of Birth
 CKC Misc. Cert. No. Canada___ Elsewhere___
 Listed

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owners _____

Owners Address _____

City _____ **Province** _____ **PC** _____

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

Agent's Address _____

City _____ **Province** _____ **PC** _____

Mail I.D. to Owner__ or Agent__ _____

Email (for schedule and fax conformation) _____

Visa/MasterCard/Am Ex No. _____ **expiry** ___/___

Name of card holder- print _____ **Signature** _____

I **CERTIFY** that I am the registered owner(s) of the dog or that I am authorized agent of the owner(s) whose names I have entered 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 appearing in the Premium list.

E-mail Address _____ **Telephone** _____