

Office Use Only



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Official Entry Form
Specialty Obedience

B.C. All Terrier Club

ENTRIES CLOSE: WEDNESDAY, March 29th, 2017@ 9:00pm Pacific Time

Fri (April 14th, 2017)

Cheques made payable to B.C. All Terrier Club
Mail to Classic Show Services #109-30989 Westridge Place Abbotsford, B.C. V2T 0E7 (604)-845-9510
Online and fax entry information at www.dogshow.ca

Entry Fee \$ _____ Listing Fee \$ _____
Catalog \$ _____ Total Enclosed \$ _____

| | | | | |
|-------------------------------------|--|--|---|---|
| <input type="checkbox"/> Pre-Novice | <input type="checkbox"/> Novice Intermediate | <input type="checkbox"/> Utility B | Addition Class: _____ | |
| <input type="checkbox"/> Novice A | <input type="checkbox"/> Open A | <input type="checkbox"/> Exhibition Only | Unofficial Classes: <input type="checkbox"/> Graduate Novice <input type="checkbox"/> Graduate Open | |
| <input type="checkbox"/> Novice B | <input type="checkbox"/> Open B | | <input type="checkbox"/> Versatility | <input type="checkbox"/> Veteran <input type="checkbox"/> Brace <input type="checkbox"/> Team |
| <input type="checkbox"/> Novice C | <input type="checkbox"/> Utility A | Jump Height: _____ | Wild Card Class: _____ | |

DOG INFORMATION *please print clearly*****

Breed _____ Variety _____ Male Female

Reg'd Name of Dog _____

CKC Reg # CKC Misc. # CCN # CKC ERN # LISTED CKC PEN # CCN # CKC PEN # Insert # Here _____

Date Of Birth _____ Place of Birth: Canada Yes Elsewhere No Puppy: Yes No

Breeder(s) _____

Sire _____

Dam _____

OWNER/AGENT INFORMATION

Reg'd Owner(s) _____ Membership # _____

Agent _____

Owner's Address _____ Postal Code _____

| | | |
|---|----------------|--------------------------|
| <input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express A service charge of 10% will be assessed. | | |
| Credit Card # _____ | Exp.Date _____ | Name of Cardholder _____ |

I certify that I am the registered owner(s) of the dog or that I am the authorized agent of the owner(s) whose name(s) I have entered above and accept full responsibility for all statements made in this entry. In the consideration of the acceptance of this entry, I 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/Agent _____ Ph.# () _____

Email Address (required) _____