	Official Canadian Kennel Club Entry Form Clumber Spaniel Club of Canada National Specialty	
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	Entry Fees	___ x \$30.00	= \$ _____
	Non Regular	___ x \$15.00	= \$ _____
	Exhibition Only	___ x \$10.00	= \$ _____
	Listing Fee	___ x \$ 9.80	= \$ _____
	Sweeps	___ x \$15.00	= \$ _____
	Catalog	___ x \$10.00	= \$ _____
	Total:		\$ _____

Please Print or type CLEARLY

Enter in one only of the following regular classes		Sweepstakes	
<input type="checkbox"/> Junior Puppy		<input type="checkbox"/> Puppy Sweeps 6-9 mos	
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Stud Dog	<input type="checkbox"/> Puppy Sweeps 9-12 mos	
<input type="checkbox"/> 12-18 months	<input type="checkbox"/> Brood Bitch	<input type="checkbox"/> Puppy Sweeps 12-18 mos	
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Brace	<input type="checkbox"/> Veteran Sweeps 7-10 yrs	
<input type="checkbox"/> Bred By Exhibitor	<input type="checkbox"/> Hunting Dog/Bitch	<input type="checkbox"/> Veteran Sweeps 10 & up	
<input type="checkbox"/> Veterans	<input type="checkbox"/> Altered		
<input type="checkbox"/> Open	<input type="checkbox"/> Exhibition Only		
<input type="checkbox"/> Specials Only			

BREED SPANIEL - CLUMBER		SEX
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NAME OF DOG		
Check one & enter Reg # here ___ CKC Reg # ___ CKC ERN # ___ CKC MSC # _____ ___ Listed	Date of Birth _____ Day Month Year	Is this a puppy? YES ___ NO ___
Place Of Birth ___ Canada ___ Elsewhere		

BREEDER

SIRE

DAM

REG. OWNER

OWNER ADDRESS

CITY	PROV	POST CODE
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AGENT NAME

AGENT ADDRESS

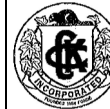
CITY	PROV	POST CODE
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Mail ID to: ___ OWNER or ___ AGENT

I CERTIFY that I am the registered owner(s) of this 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 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. Also, by signing this form I certify that I will not hold the Show giving Club, it's members, Directors, Employees or Agents liable in the event of any accident or misfortune however caused.

Signature of agent or owner _____ Phone Number _____

Email _____

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