	OFF	OBEDIENCI TRACI Sunday Oc	AN KENNEL 2 VICTORIA I 5 TRAINING KING TEST 5 tober 2nd 20 & 3 TDX	DOG CLUB	FORM	
ENTRY		TI TD ke cheque payable to Please <b>DO NOT abb</b>	X \$ "Greater Victoria reviate to GVDO	C on cheque/money	v order	
	E Closin	Note: please send che will not be accepte ntries received pri g date for entries tries to: Amalie B	d prior to 9 a.m or to this date a will be 5 p.m. T	and time will be re hursday Septemb	ember 1 <sup>st</sup> 2011 eturned er 22 <sup>nd</sup> 2011	
BREED: Reg. Name o				SEX:		
CK( CK(	e and enter numbe C Reg. # C Ern# C Misc Cert.# ed	er	Date of birth	Day Plac Canad	Month e of Birth a Elsewh	Year
Breeder				Callau	a Eisewii	ere
Sire:						
Dam:						
Registere	d Owner (s)					
Owner's A	ddress					
City		Prov.		Postal Code		
Country				Call Name		
Name of C	)wner's agent (if a	ny) at the show				
Agent's A	ddress					
City		Prov.		Postal Code		
Country				Call Name		
Name of C	)wner's agent (if a	ny) at the show				
Agent's A	ddress					
City		Prov.		Postal Code		
Mail ID to	Owner or	Agent	(check one only)			
I certify that I	am the registered owne	r(s) of the dog or that I a	m the authorized ag	ent of the Owner(s) wh	ose name(s) I have	e entered above & accept

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 & 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 & regulations of the Canadian Kennel Club & by any additional rules and regulations appearing in the premium list.