



**OBEDIENCE TRIALS
SWANSEA DOG OBEDIENCE CLUB**

Sat. May 26, 2018	Sun. May 27, 2018	Entry Fees \$ _____
<input type="checkbox"/> Trial 135	<input type="checkbox"/> Trial 137	Listing Fees \$ _____
<input type="checkbox"/> Trial 136	<input type="checkbox"/> Trial 138	Catalogue \$ _____
		TOTAL \$ _____

Entries Close at 8:00 p.m. on Friday May 11, 2018
Please type or print clearly

Breed _____ Sex _____

Enter in the following classes:

- | | | |
|--|-------------------------------------|--|
| <input type="checkbox"/> Pre-Novice | <input type="checkbox"/> Open "HA" | <input type="checkbox"/> Utility "A" JUMPS: HEIGHT _____ |
| <input type="checkbox"/> Novice "A" | <input type="checkbox"/> Open "HB" | <input type="checkbox"/> Utility "B" |
| <input type="checkbox"/> Novice "B" | <input type="checkbox"/> Open "18A" | <input type="checkbox"/> Exhibition Only WIDTH _____ |
| <input type="checkbox"/> Novice "C" | <input type="checkbox"/> Open "18B" | |
| <input type="checkbox"/> Novice Intermediate | | |

Reg. Name of Dog _____

Check One – and – **Enter Number Here**

- CKC Reg. No.
- CKC ERN
- CKC PEN
- CKC CCN
- Listed

Date of Birth
D _____ M _____ Y _____

Place of Birth
 Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____ CKC Member No. _____

Owner's Address _____

City _____ Prov. _____ Postal Code _____

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

Agent's Address _____

Mail I.D. to Owner or Agent

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 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 NO.

E-MAIL ADDRESS



**RALLY OBEDIENCE TRIALS
SWANSEA DOG OBEDIENCE CLUB**

Sat. May 26, 2018	Sun. May 27, 2018	Entry Fees	\$ _____
<input type="checkbox"/> Trial 21	<input type="checkbox"/> Trial 23	Listing Fees	\$ _____
<input type="checkbox"/> Trial 22	<input type="checkbox"/> Trial 24	Catalogue	\$ _____
		TOTAL	\$ _____

Entries Close at 8:00 p.m. on Friday May 11, 2018
Please type or print clearly

Breed _____ Sex _____

Enter in the following classes:

- | | | |
|---------------------------------------|--|---------------------|
| <input type="checkbox"/> Novice "A" | <input type="checkbox"/> Excellent "A" | JUMPS: HEIGHT _____ |
| <input type="checkbox"/> Novice "B" | <input type="checkbox"/> Excellent "B" | |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> Master | WIDTH _____ |
| <input type="checkbox"/> Advanced "A" | <input type="checkbox"/> Exhibition Only | |
| <input type="checkbox"/> Advanced "B" | | |

Reg. Name of Dog _____

Check One – and – **Enter Number Here**

- CKC Reg. No.
- CKC ERN
- CKC PEN
- CKC CCN
- Listed

Date of Birth
D _____ M _____ Y _____

Place of Birth
 Canada Elsewhere

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____ CKC Member No. _____

Owner's Address _____

City _____ Prov. _____ Postal Code _____

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

Agent's Address _____

Mail I.D. to Owner or Agent

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 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 NO. _____

E-MAIL ADDRESS _____