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**Official Canadian Kennel Club Entry Form**

**SCENTRAL ONTARIO TRACKERS**

**TD & TDX TRACKING TEST SUNDAY NOVEMBER 10, 2024**

**ENTRIES CLOSE: Nov 6TH 12:00 PM**

Entry Fee \_\_\_\_\_\_\_\_\_ TCN Fee ($11.30) \_\_\_\_\_\_\_\_\_ TOTAL \_\_\_\_\_\_\_\_\_\_\_\_

MAIL ENTRIES: Andrea Lister 154 Clarke Rd, Paris, ON, N3L3E1 or email to: alister@wlu.ca

BREED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_VARIETY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEX: \_\_\_ Male \_\_\_ Female

CLASS:\_\_\_\_**TD ($85) \_\_\_\_ TDX ($100)**

\_\_\_ **Check here if the dog has already earned the title for the class you are entering**

REG. NAME OF DOG: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_ CKC REG. \_\_\_\_ CKC ERN CHECK ONE AND ENTER NUMBER HERE:**

**\_\_\_\_ CKC PEN \_\_\_\_ CKC MISC.**

**\_\_\_\_ LISTED \_\_\_\_ CKC CCN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

DATE OF BIRTH: Month \_\_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_\_ Call name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLACE OF BIRTH: \_\_\_ Canada \_\_\_ Elsewhere

BREEDER(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIRE: ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REG’D OWNER(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CKC Member #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OWNER’S ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_\_\_\_\_\_\_\_

NAME OF OWNER’S AGENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGENT’S ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_\_\_\_\_\_\_\_

SEND ANY COMMUNICATION TO: \_\_ OWNER \_\_ AGENT

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 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 NUMBER:

EMAIL ADDRESS: