



**Official Kennel Club Entry Form**  
**Prairie Canine Academy**  
**ALL BREED CONFORMATION ENTRY ONLY**  
**Make cheques payable to Prairie Canine Academy**  
**JUNE 16, 17, 18 2017**



Conformation:

Friday, June 16, 2017  
 Saturday, June 17, 2017  
 Sunday, June 18, 2017

Show # 1	<input type="checkbox"/>	Show # 2	<input type="checkbox"/>
Show # 3	<input type="checkbox"/>	Show # 4	<input type="checkbox"/>
Show # 5	<input type="checkbox"/>	Show # 6	<input type="checkbox"/>

**Entries close Wednesday, May 24, 2017 at 9:00 pm CST**

**Entry Fees** :Regular and Altered Class \$ 150.00 for all 6 Shows **OR** \$28.00 per show  
 Exhibition Only/Baby Puppy Exhibition Only 10.00 Listing Fees \$ 8.95  
 Baby Puppy Class \$ 22.00 Veteran Class \$ 28.00

**Entry Fee \$** \_\_\_\_\_ **Listing Fee \$** \_\_\_\_\_ **Total \$** \_\_\_\_\_  
**Pre Paid Catalog** \_\_\_\_\_ **x \$ 10.00** **Total \$** \_\_\_\_\_

**BREED:** \_\_\_\_\_ **VARIETY:** \_\_\_\_\_ **SEX** Male   
 Female

<b>Regular Classes:</b>	<input type="checkbox"/> Bred by Exhibitor	<b>Unofficial Classes:</b>
<input type="checkbox"/> Junior Puppy	<input type="checkbox"/> Open	<input type="checkbox"/> Baby Puppy
<input type="checkbox"/> Senior Puppy	<input type="checkbox"/> Specials Only	<input type="checkbox"/> Altered
<input type="checkbox"/> 12 - 18 Month	<input type="checkbox"/> Exhibition Only	<input type="checkbox"/> Veteran
<input type="checkbox"/> Canadian Bred	<input type="checkbox"/> Exhibition Only (3 -6 month puppy)	

**Registered Name:** \_\_\_\_\_

**Check one ONLY** Enter Number Date of Birth  
 CKC Reg # \_\_\_\_\_ Day / Month / Year Is this dog a puppy ?  
 CKC ERN # \_\_\_\_\_ / / YES  NO   
 CKC Misc Cert # \_\_\_\_\_  
 Listed Place of Birth  Canada  Elsewhere

**Breeder/s** \_\_\_\_\_

**Sire** \_\_\_\_\_

**Dam** \_\_\_\_\_

**Reg Owner/s** \_\_\_\_\_

**Owner's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Prov** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Agent's Name (if any)** \_\_\_\_\_

**Agent's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Prov** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**ID will NOT be mailed. Please supply email address below for entry conformation**  
**FOR MAIL OR DROP OFF ENTRIES ONLY 14 Mossing Bay, Regina. SK S4N 4H4**

For ONLINE Entries **VISA/MASTER CARD/AMERICAN EXPRESS INFORMATION**  
 VISA  MASTER CARD  AMERICAN EXPRESS

**CARD #** \_\_\_\_\_ **Expiry Date** \_\_\_\_\_ / \_\_\_\_\_  
 Month Year

**Name of Card Holder** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Phone #** \_\_\_\_\_

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 are entered above and I 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 CKC and by any additional rules and regulations in the premium list.

**Email** \_\_\_\_\_  
 PLEASE PRINT YOUR EMAIL CLEARLY SO THAT WE CAN EMAIL YOUR CONFORMATION OF ENTRY