



OFFICIAL CANADIAN KENNEL CLUB FORM
Vizsla Canada
Field Dog Tests - September 15-16, 2018

TEST# 1 (Saturday) FDJ <input type="checkbox"/>	TEST# 2 (Sunday) FDJ <input type="checkbox"/>
FD <input type="checkbox"/>	FD <input type="checkbox"/>
FDA <input type="checkbox"/>	FDA <input type="checkbox"/>
FDX <input type="checkbox"/>	FDX <input type="checkbox"/>

I Enclose \$ _____ For Entry Fees \$ _____ For Listing Fees \$ _____
Please Type or Print Clearly

Breed	Sex
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Reg. Name

Handler Dog's Call Name

Check One -and - enter number here <input type="checkbox"/> CKC Reg. No. <input type="checkbox"/> CKC ERN No. <input type="checkbox"/> CKC Misc. Cert. No. <input type="checkbox"/> Listed <input type="checkbox"/> Foreign No. & Country	Date of Birth (D/M/Y)	Is this a puppy? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeders(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Postal Code
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Name of Owner's Agent/Handler at the Test

Agent's Address

City	Prov.	Postal Code
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I (we) hereby certify that I (we) 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.

I (we) further agree that the dog entered is and will be at this test at my (our) own risk and that I (we) will hold the test-giving club, its members, agents and landowners free from liability for any claims arising out of the entry of the dog or its presence at the test.

SIGNATURE OF OWNER OR AGENT TELEPHONE NO.

E-mail address: _____ Will you be buying lunch at our concession? _____



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