



OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION
GOLDEN RETRIEVER CLUB OF CANADA
NATIONAL SPECIALTY SHOW
Friday, July 16 and Saturday, July 17, 2010

CLOSING DATE: 8 p.m. EST
WED. JUNE 23, 2010
 Make fees payable to
Golden Retriever Club of
Greater Toronto
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Official Classes	\$ _____	Non-Regular	\$ _____
(\$27.00 ea)		(\$12.00 ea)	
Listing Fees	\$ _____	Unofficial Class	\$ _____
(\$9.30)		(\$12.00 ea)	
Exhibition Only	\$ _____	Parades	\$ _____
(\$5.00)		(\$12.00 ea)	
Sweeps/Vet Sweeps	\$ _____	Catalogue	\$ _____
(\$12.00 each)		(\$15.00 ea)	
		TOTAL ENCLOSED	\$ _____

Please type or print clearly

Breed	Retriever (Golden)	Variety	Sex
-------	--------------------	---------	-----

Enter in the following Classes:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open | <input type="checkbox"/> Brace Class | <input type="checkbox"/> Juvenile Sweepstakes (Fri.) |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Veterans (7-10 yrs) | <input type="checkbox"/> Stud Dog Class | <input type="checkbox"/> Veteran Sweepstakes (Fri.) |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Veterans (10+ yrs) | <input type="checkbox"/> Brood Bitch Class | <input type="checkbox"/> Parade of Veterans (Fri.) |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Gun Dog & Bitch Class | <input type="checkbox"/> Parade of Titleholders (Fri.) |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | <input type="checkbox"/> Field Dog & Bitch Class | |

Reg. Name of Dog _____

Check One - and - Enter Number here	Date of Birth	Is this a puppy?
<input type="checkbox"/> CKC Reg. No.	D _____ M _____ Y _____	YES ___ NO ___
<input type="checkbox"/> CKC ERN No.		
<input type="checkbox"/> CKC Misc. Cert. No.	Place of Birth	
<input type="checkbox"/> Listed	<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City	Prov.	Code
------	-------	------

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

Agent's Address _____

City	Prov.	Code
------	-------	------

Mail I.D. to Owner or Agent Email _____

FAX ENTRIES ONLY	
<input type="checkbox"/> Amer Express <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA Card No. _____	Expiry _____
Name of Cardholder _____	Signature _____

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT _____

TELEPHONE NO. _____



OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION
GOLDEN RETRIEVER CLUB OF CANADA
NATIONAL SPECIALTY SHOW
Friday, July 16 and Saturday, July 17, 2010

CLOSING DATE: 8 p.m. EST
WED. JUNE 23, 2010
 Make fees payable to
Golden Retriever Club of
Greater Toronto
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Official Classes	\$ _____	Non-Regular	\$ _____
(\$27.00 ea)		(\$12.00 ea)	
Listing Fees	\$ _____	Unofficial Class	\$ _____
(\$9.30)		(\$12.00 ea)	
Exhibition Only	\$ _____	Parades	\$ _____
(\$5.00)		(\$12.00 ea)	
Sweeps/Vet Sweeps	\$ _____	Catalogue	\$ _____
(\$12.00 each)		(\$15.00 ea)	
		TOTAL ENCLOSED	\$ _____

Please type or print clearly

Breed	Retriever (Golden)	Variety	Sex
-------	--------------------	---------	-----

Enter in the following Classes:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Junior Puppy | <input type="checkbox"/> Open | <input type="checkbox"/> Brace Class | <input type="checkbox"/> Juvenile Sweepstakes (Fri.) |
| <input type="checkbox"/> Senior Puppy | <input type="checkbox"/> Veterans (7-10 yrs) | <input type="checkbox"/> Stud Dog Class | <input type="checkbox"/> Veteran Sweepstakes (Fri.) |
| <input type="checkbox"/> 12-18 Months | <input type="checkbox"/> Veterans (10+ yrs) | <input type="checkbox"/> Brood Bitch Class | <input type="checkbox"/> Parade of Veterans (Fri.) |
| <input type="checkbox"/> Canadian Bred | <input type="checkbox"/> Specials Only | <input type="checkbox"/> Gun Dog & Bitch Class | <input type="checkbox"/> Parade of Titleholders (Fri.) |
| <input type="checkbox"/> Bred by Exhibitor | <input type="checkbox"/> Exhibition Only | <input type="checkbox"/> Field Dog & Bitch Class | |

Reg. Name of Dog _____

Check One - and - Enter Number here	Date of Birth	Is this a puppy?
<input type="checkbox"/> CKC Reg. No.	D _____ M _____ Y _____	YES ___ NO ___
<input type="checkbox"/> CKC ERN No.		
<input type="checkbox"/> CKC Misc. Cert. No.	Place of Birth	
<input type="checkbox"/> Listed	<input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s) _____

Sire _____

Dam _____

Reg'd Owner(s) _____

Owner's Address _____

City	Prov.	Code
------	-------	------

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

Agent's Address _____

City	Prov.	Code
------	-------	------

Mail I.D. to Owner or Agent Email _____

FAX ENTRIES ONLY	
<input type="checkbox"/> Amer Express <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA Card No. _____	Expiry _____
Name of Cardholder _____	Signature _____

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT _____

TELEPHONE NO. _____



OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION
GOLDEN RETRIEVER CLUB OF GREATER TORONTO INDEPENDENT SPECIALTY SHOW
Sunday, July 18, 2010

CLOSING DATE: 8 p.m. EST
WED. JUNE 23, 2010
 Make fees payable to
Golden Retriever Club of Greater Toronto
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Official Classes \$ _____ Non-Regular (\$12.00 ea) \$ _____
 Listing Fees \$ _____ Unofficial Class (\$12.00 ea) \$ _____
 Exhibition Only (\$9.30) \$ _____ Catalogue (\$15.00 ea) \$ _____
 Exhibition Only (\$5.00) \$ _____ TOTAL ENCLOSED \$ _____

Please type or print clearly

Breed	Retriever (Golden)	Variety	Sex
-------	---------------------------	---------	-----

Enter in the following Classes:

- Junior Puppy Bred by Exhibitor Specials Only Exhibition Only
 Senior Puppy Open Brace Class Gun Dog & Bitch Class
 12-18 Months Veterans (7-10 yrs) Stud Dog Class Field Dog & Bitch Class
 Canadian Bred Veterans (10+ yrs) Brood Bitch Class

Reg. Name of Dog

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	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Code
------	-------	------

Name of Owner's Agent (if any)

at the Show

Agent's Address

City	Prov.	Code
------	-------	------

Mail I.D. to Owner or Agent Email _____

FAX ENTRIES ONLY

Amer Express Mastercard VISA Card No. _____ Expiry _____
 Name of Cardholder _____ Signature _____

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.



OFFICIAL CANADIAN KENNEL CLUB FORM
CONFORMATION
GOLDEN RETRIEVER CLUB OF GREATER TORONTO INDEPENDENT SPECIALTY SHOW
Sunday, July 18, 2010

CLOSING DATE: 8 p.m. EST
WED. JUNE 23, 2010
 Make fees payable to
Golden Retriever Club of Greater Toronto
 and mail to:
 MJN Show Services
 9 Samya Court
 Scarborough, ON M1R 2A4

Official Classes \$ _____ Non-Regular (\$12.00 ea) \$ _____
 Listing Fees \$ _____ Unofficial Class (\$12.00 ea) \$ _____
 Exhibition Only (\$9.30) \$ _____ Catalogue (\$15.00 ea) \$ _____
 Exhibition Only (\$5.00) \$ _____ TOTAL ENCLOSED \$ _____

Please type or print clearly

Breed	Retriever (Golden)	Variety	Sex
-------	---------------------------	---------	-----

Enter in the following Classes:

- Junior Puppy Bred by Exhibitor Specials Only Exhibition Only
 Senior Puppy Open Brace Class Gun Dog & Bitch Class
 12-18 Months Veterans (7-10 yrs) Stud Dog Class Field Dog & Bitch Class
 Canadian Bred Veterans (10+ yrs) Brood Bitch Class

Reg. Name of Dog

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	Date of Birth D _____ M _____ Y _____	Is this a puppy? YES ___ NO ___
	Place of Birth <input type="checkbox"/> Canada <input type="checkbox"/> Elsewhere	

Breeder(s)

Sire

Dam

Reg'd Owner(s)

Owner's Address

City	Prov.	Code
------	-------	------

Name of Owner's Agent (if any)

at the Show

Agent's Address

City	Prov.	Code
------	-------	------

Mail I.D. to Owner or Agent Email _____

FAX ENTRIES ONLY

Amer Express Mastercard VISA Card No. _____ Expiry _____
 Name of Cardholder _____ Signature _____

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. Also by signing this form, I certify that I will not hold the Show giving Club, its members, directors, employees or agents liable in the event of any accident of misfortune however caused.

SIGNATURE OF OWNER OR AGENT

TELEPHONE NO.