Instructions

Name of Club



## CLUB CANIN CANADIEN<sup>MD</sup>

5397 EGLINTON AVE, SUITE 101, ETOBICOKE, ONTARIO M9C 55K6 TEL (416) 675-5511 1 (855) 364-7252 www.ckc.ca

## EVENT DATE APPLICATION

## **Conformation, Obedience & Rally Obedience**

- All required sections of the application must be complete. •
  - The application must be signed.

- Incomplete applications will be returned.
- Application to be received a minimum of 180 days prior to the event. •
- A letter of consent is required from the all-breed club for specialty events held in • conjunction with an all-breed club.

**CANADIAN KENNEL CLUB®** 

Club Number

Type of Event	# of Events/Da	ау	Dates
All Breed Conformation Show			
Specialty Conformation Show			
Group Specialty Conformation Show			
Field Trial Conformation Show			
Multiple Shows on Same Date			
Limited Breed Show - Conformation			
Junior Handling - Conformation			
Junior Handling - Obedience			
All Breed Obedience Trial			
Specialty Obedience Trial			
All Breed Rally Obedience Trial			
Specialty Rally Obedience Trial			
Sweepstakes			
Attractions and Demonstrations			
Other			
Unofficial/Non-Regular Classes			(PLEASE LIST THE CLASSES HERE)
			(FLEASE LIST THE OLASSES TIERE)
r Office Use Only			
Breeds (Conformation):		Breeds (Obedience	3):
	y when the event does not include all breeds		List individual breeds only when the event does not include all breed
National Specialty: Yes No	Obedience Climited Trial(s)	Unlimited Trial(s)	Canine Companion Dogs (CCN): Yes No
	Rally CLimited Trial(s)	Unlimited Trial(s)	(Obedience & Rally Obedience)
Breeds Excluded (if applicable):			
Name of Venue:			
Address:			
City:	Province:		Postal Code:
Specialty Event held in conjunction with:			(Attach letter of consent)
Conformation: Oldoor Outdoor	Obedience: 🔿 Indoor	(Name of All	-Breed Club) Club to be invoiced: All-Breed Specialty
		Outdoor	Club to be invoiced. All-breed Ospecially
Event Secretary:		CKC Membership	No:
Address:		E-mail:	
Event Superintendent:		CKC Membership No:	
President:		CKC Membership No:	
		CKC Membership No:	
Vice President:		CKC Momborship	Ne
Vice President:			
Vice President: Secretary:		CKC Membership CKC Membership	
			No:
Secretary:		CKC Membership	No:
Secretary:	>(())D)	CKC Membership	No:
Secretary: Treasurer:	>(0)B	CKC Membership CKC Membership	No:
Secretary: Treasurer:	and Title of Club Officer or Event Secr	CKC Membership CKC Membership	No:
Secretary: Treasurer: Date Name a	>(0)B	CKC Membership CKC Membership	No: