



THERAPY DOG TITLE APPLICATION FORM

The CKC will record titles earned by approved Therapy Dog Organizations. The owner may submit this completed application along with a copy of the certificate from the approved organization or a record of visits form (found on www.ckc.ca forms-Therapy Dogs Record Form) title certificate plus the fee as per the CKC Schedule of Fees and CKC will place the title on the dog's record and produce a certificate. Applying for the CKC title and certificate is at the discretion of the owner.

All dogs must be CKC registered (individual No, MCN, ERN, CCN or PEN) to receive a CKC title.

Please keep a copy of this form for your records.

Owner's Name: _____

Address: _____

Telephone No: _____ Email: _____

Dog's Name: _____ Breed: _____

Registration No: Individual ERN CCN MCN PEN

Indicate Individual, ERN, CCN, MCN PEN No.

Please check title you are applying for

- CGN (CKC) - Strongly recommended
 Therapy Dog Novice Title (THDN) - 10 Visits
 Therapy Dog Title (THD) - 50 Visits
 Therapy Dog Advanced Title (THDA) - 100 Visits
 Therapy Dog Excellent Title (THDX) - 200 Visits
 Therapy Dog Distinguished Title (THDD) - 500 Visits

Title to be Recorded: _____ Date Earned: _____

Record Title Only: _____

Applicable Taxes: _____

5%GST - AB, BC, MB, QC, SK, YT
15%HST - NB, NL, NS, PEI
13%HST - ON

Total Amount Submitted: _____

PAYMENT INFORMATION

- For applicable fees, please refer to the CKC Schedule of Fees at www.ckc.ca - for title dog, payable by Visa, MasterCard, money order or certified cheque
Credit Cards - Send application with credit card information to eventapps@ckc.ca Staff will be contacting you for the CVV number by telephone to complete the payment.
Cheques - Send application with cheque payable to The Canadian Kennel Club to 101-5397 Eglinton Ave West, Etobicoke ON M9C 5K6.
E-transfers - Send payment and application with the answer to the security to question to etransfers@ckc.ca

Please note: We do not accept cash and discounted US cheques.

Service fee of \$45.00 will be levied for any NSF cheques or credit card chargebacks.

Payment options: VISA MasterCard Certified Cheque Money Order Total Amount Enclosed: _____

Credit Card Number

Expiry Date

Clearly Print Cardholder Name

Authorized Cardholder Signature