



ENTRY FORM



Estonian Kennel Union
 Siili 21 – 100, EST-13422, TALLINN, Estonia
 Fax: +372-671 5022

PLACE AND TIME:

Select class:

Puppy 6-9 m.o.	Junior 9-18 m.o.	Intermediate 15-24 m.o.	Open from 15 m.o.	Champion from 15 m.o.	Working from 15 m.o.	Veteran from 8 y.o.	Progeny Class	Breeders Class
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DOG	
Breed	
Name	
Titles Confirmed	
Studbook No.	Male Female
Date of Birth	Colour
Microchip No.	Tattoo

PARENTS	
Sire's Titles	
Sire's Name	
Sire's Studbook No.	
Dam's Titles	
Dam's Name	
Dam's Studbook No.	

BREEDER	
Name	
Address	

OWNER	
Name	
Address	Zip-code
Town / County	State
Tel. / fax / e-mail	

Entry fee of _____ EUR has been paid _____ in cash _____ Receipt No: _____
 _____ on the bank account Date: _____
 Are you member of the EKU? No _____ Please attach a copy of the receipt to the entry form
 Yes, membership card No. _____

**HEREBY I CONFIRM ALL THE DATA GIVEN ABOVE IS CORRECT.
 HEREBY I AM OBLIGED TO FOLLOW THE ESTONIAN KENNEL UNION SHOW REGULATIONS.**

Date: _____