

Mail this entry form to:
 416 West San Ysidro Blvd.
 Suite L-1011
 San Ysidro CA 92173
 Make check payable to Claudia Pierce

**ENTRY
FORM**



Miembro de
Federación Canófila Mexicana



**Note: Please fill out one form per each set of shows
 (Mexicali / Tijuana / Ensenada)**

| | | | |
|---------------------------------------|--|----------------|--------|
| EVENT (MEXICALI / TIJUANA / ENSENADA) | | | |
| BREED / VARIETY | | MALE | FEMALE |
| COLOR AND MARKING | | | |
| DOGS NAME | | | |
| BIRTH DATE dd/mm/yy | | PLACE OF BIRTH | |
| FCM OR FOREIGN REG. NUM. | | MICROCHIP | |
| SIRE | | | |
| DAM | | | |
| HANDLER'S NAME | | | |
| OWNER'S NAME | | | |
| OWNER'S ADDRESS | | | |
| CITY | | STATE | |
| ZIP CODE | | PHONE | E-MAIL |

SHOWING DATES

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CLASS

| | | | |
|----------|--|-------------------|--|
| PUPPY A | | OPEN & WORKING | |
| PUPPY B | | BRED BY EXHIBITOR | |
| PUPPY C | | CHAMPION CLASS | |
| YOUNG | | TEMP. TEST | |
| MEX BRED | | | |

By signing this official document I(we) agree to abide by the rules and regulations of Club Canófilo Caliente and FCM I(we) certify that all data above is truth.

OWNER'S HANDLER SIGNATURE REQUIRED

FCM USE ONLY

| C.B. | C.C. | J | C.MEX. | LIBRE Y TRABAJO | MANEJADO POR SU DUEÑO | VENC. | CACM | RESV. CACM | M.R. | M.S.O. | CGCM | RESV. CGCM | CACLAB | RESV. CACLAB | CACIB | RESV. CACIB | Lugar GRUPO |
|------|------|---|--------|-----------------|-----------------------|-------|------|------------|------|--------|------|------------|--------|--------------|-------|-------------|-------------|
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