



REGISTER OF MERIT (ROM/ROMX) APPLICATION

Please complete all parts of this form, using the reverse side if you require additional space.

TYPE OF APPLICATION (Please include a photograph of the dog/bitch with your application)

ROM

Dog

Bitch

ROMX

Dog

Bitch

PERSONAL INFORMATION

Last Name of Owner

First Name

Address

City

Province/State

Postal/Zip Code

Country

Telephone

Fax

E-mail Address

Website Address

INFORMATION ABOUT THE DOG/BITCH

Registered Name of Dog/Bitch

CKC Registration No.

Sex

Date of Birth

Date Deceased (if applicable)

Breeder(s)

THREE GENERATION PEDIGREE

Please be sure to include a photograph of the dog/bitch.

TITLED OFFSPRING

Registered Name	CKC Reg'n #	Date Finished	Registered Name	CKC Reg'n #	Date Finished

Declaration: I hereby certify that to the best of my knowledge and belief, the above pedigree and other information is true and correct.

Date

Signature

Please forward your completed application:

Gail Stewart

14704 Riverbend Road NW, Edmonton, AB, T6H 1K1, Canada

Have you included a photograph of the dog/bitch with your application? Yes No