

GOLDEN RETRIEVER CLUB WORKING TESTS (ID1397)

Sunday 28th April, 2019

PLEASE TICK APPROPRIATE CLASS (s)

PUPPY ND/NH NOVICE OPEN VETERAN

INSTRUCTIONS: Writing MUST BE IN INK AND BLOCK CAPITALS
 This form must be used by one person only (or partnership). Use one line only for each dog. The name of the dog and all details as recorded with the Kennel Club must be given on this form. If an error is made the dog may be disqualified by the Committee of the Kennel Club. ENTRIES FOR TESTS WILL ONLY BE ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP) vide Reg. J1.a., 6a(i) & B20) and if a registered dog has changed ownership the TRANSFER must be applied for before the closing of entries. When entering more than one breed or variety, use if possible a separate form for each one. On no account will entries be accepted without fees.

Entries Close On
SUN. 14TH APRIL 2019

Entry Fee
Members £8
 Late & non- members £12

	REGISTERED NAME OF DOG (BLOCK CAPITALS)	KC No. / Stud Book No. ATC No.	FULL DATE OF BIRTH	BREEDER	SIRE (BLOCK CAPITALS)	DAM (BLOCK CAPITALS)
1						
		BREED: GR	SEX			
		CLASS				
2						
		BREED: GR	SEX			
		CLASS				

DECLARATION

"I/we agree to submit to and be bound by The Kennel Club Rules and Regulations in their present form or as they may be amended from time to time in relation to all canine matters with which The Kennel Club is concerned. I/we also undertake to abide by the Regulations of this Test and not to bring to the Test any dog which has contracted or been knowing exposed to any infectious disease during the 21 days prior to the day of the Test. I also declare that I am fully conversant with the Field Trial Regulations and Gundog Working Test Regulations. I further declare that, I believe to the best of my knowledge that the dogs are not liable to disqualification under Kennel Club Gundog Field Trial Regulations."

Usual Signature of Owner(s).....Date.....

Note: Dogs entered in breach of Kennel Club Rules and F.T. Regulations are liable to disqualification whether or not the owner was aware of the breach.

Name of OWNER(S) (In block capitals)

Address:

Telephone No:

e-mail

Name of Handler (if different)

Entries together with S.A.E.and Fees (which MUST be prepaid) to be sent to:

MRS LUCY JENKINS
GLAN-Y-MYNYDD,
ABERBEEG, ABERTILLEY, GWENT. NP13 2DT
07880 984 180