									ID No: 4036		Trial Date/Stake: Entries Close:				
This form must be used by Use one line only for each of an error is made the dog material ACCEPTED FROM GUND & B20) and if a registered of the state				AND BLOCK CAPITALS one person only (or partnership). dog. The name of the dog and all the details as recorded with The Kennel Club must be ay be disqualified by the Committee of The Kennel Club. ENTRIES FOR FIELD TRIDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP (vide log has changed ownership the TRANSFER must be applied for before the closing ownership the discovered by the closing of the closing of the club of the club in the club of the club in t						WILL C J1.a., J7a ries.	ONLY BE	ENTRY As per so	FEES: chedule, please include b	elow:	
	REGISTERED NAME OF DOG			KENNEL CLUB REGISTRATION NO., STUD BOOK NO. OR ATC NO.		Breed	Sex	FULL DATE OF BIRTH	BREED	BREEDER SII (BLOCK I			DAM (BLOCK LETTERS)	Stake No	
1															
2															
									If you d	lo not v	want your add	lress on tl	he card please tick this	box 🗆	
	QUALIFICATION SEE SCHEDULE DATE			ARD	STAKE		PROMOTING SOCIETY				Owner(s)				
1	JOHEDOLL DATE		ТИТКО		STARL		TROMOTING BOCILLY				ADDRESS				
2										Telepho Email	one No		Fax No		
ONE LINE FOR EACH DOG CHECK ALL DETAILS BEFORE POSTING															
I/we	DECLARATION I/we agreed to submit to and be bound by The Kennel Club Ltd 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 and that this entry is made upon the basis that all current single or joint registered owners of this dog(s) have authorised/consented to this entry.									Entries and Fees which MUST BE PREPAID to be sent to: Mr S. Hynd 3 Woodland Drive Rogerstone Newport					
exp	I/we also undertake to abide by the Regulations of this Trial and not to bring to the Trial any dog which has contracted or been knowingly exposed to any infectious disease during the 21 days prior to the day of the Trial, or which is suffering from a visible condition which adversely affects its health or welfare. I also declare that I am fully conversant with the Field Trial Regulations and have studied the guide to									NP10 9 Teleph	OGB one:01633 60	1009			
	Conduct at Field Trials.									Name Of Handler (In block letters)					
	I further declare that I believe to the best of my knowledge that the dogs are not liable to disqualification under Kennel Club Field Trial Regulations.								rial	`	, 				
Usual Signature of Owner(s)								vare of	Telepho	one No		Fax No			