

## Worcestershire **Gundog Society**

KENNEL CLUB

## Working Test Registration Form Retrievers

STAKE OR

	NSTRUCTIONS	WRITING MUST	BE IN INK A	ND BLOCK	CAPITALS
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REGISTERED NAME OF DOG

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 the details as recorded with the Kennel Club must be given on this entry form. If an error is made the dog maybe disqualified by the Committee of the Kennel Club.

ENTRIES FOR GUNDOG WORKING TESTS WILL ONLY BE ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP (vide Reg. J1.a., J7a & 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. On no account will entries be accepted without fees, unless otherwise stated.

Working Test	Venue/Location	Entry Closing Date	Entry Fee

(Block Capitals)  REGISTRATION NO. STUD  BOOK NO. OR ATC NO.		OF BIRTH	BREEDER SIR		E Dam		CLASS YOU ARE ENTERING	
DOG 1		Breed	Sex					
DOG 2		Breed	Sex					
	ONE LINE FOR EACH DOG (CHECK ALL DETAILS BEFORE POSTING)  DECLARATION:		Owners Details			Handlers Details (if different to owner)		
I/We agree 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 Ltd 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.		Forename	Surname		Forename Surname			
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 knowingly exposed to any infection disease during the 21 days prior to the day of the Test or which is suffering from a visible condition which adversely affects its health or welfare.		Address Line 1 Address Line 2		Add	Address Line 1 Address Line 2		ue 2	
I/We also declare that I/We am fully conversant with the Field Trial Regulations and have studied the guide to Conduct at Field Trials.		Town/City County		Town	Town/City County			
I/We further declare that I/We believe to the best of my acknowledge that the dogs are not liable to disqualification under Kennel Club Ltd Rules and Regulations.								
Usual Signature of Owner(s)		Postcode	Membership	o No.	Postcode Membersh		p No.	
	Date							
NOTE: Dogs entered in breach of Kennel Club Ltd Rules and F.T. Regulations are liable to disqualification whether or not the owner was aware of the breach.		Telephone Nur	mber e-mail Addr	ess	phone Number	e-mail Ada	Iress	
	If you do not want your address on the ru	nning schedule please tick here						

**FULL DATE**