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| WESTWARD GUNDOG SOCIETY | ID No: 519 | Date of Test: | | | |
| | Puppy/Novice/Open (delete as appropriate) Test No: Novice Handler: Yes / No (delete as appropriate) | | | | Entry fee enclosed: Online payment – see schedule SEPARATE CHEQUE for each dog entered in each event |
| | REGISTERED NAME OF DOG | KC REG NO | DATE OF BIRTH | BREED | SEX |
| 1 | | | | | |
| 2 | | | | | |
| NOTE: Please enclose a STAMPED ADDRESSED ENVELOPE or EMAIL ADDRESS for the draw results. DECLARATION I/We agree to submit to and be bound by the Kennel Club Rules & 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 knowingly 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 KC Regulations for Gundog working tests. 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* Usual signature of Owner/sDate..... Note: Dogs entered in breach of Kennel Club regulations are liable to disqualification whether or not the owner was aware of the breach. | | | Name of Owner(s): Address: Telephone No(s): Email Address for draw result: Name of Handler: Telephone No(s): | | |

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