



**OFFICIAL ENTRY FORM**

**(Field Dog Test)**

German Shorthair Pointer Club of Canada

Field Dog Test for Pointing Breeds

Date September 26, 2015

**FEES**

**ENTRY FEE** \_\_\_\_\_

**LISTING FEE** \_\_\_\_\_

**TOTAL** \_\_\_\_\_

**Name of Club** \_\_\_\_\_

**TEST ENTERED**

test 1

test 2

\_\_\_\_\_

\_\_\_\_\_

\_FDJ \_FD \_FDA \_FDX

\_FDJ \_FD \_FDA \_FDX

**DOG INFORMATION**

Registered Name of Dog \_\_\_\_\_ Call Name \_\_\_\_\_

Breed \_\_\_\_\_  Male  Female

\_CKC registration # \_\_\_\_\_ \_CKC miscellaneous # \_\_\_\_\_ Listed \_\_\_\_\_

\_ ERN # \_\_\_\_\_ PRN # \_\_\_\_\_

DD MM YY

Date of Birth \_\_\_\_\_ Place of birth  Canada  other

Breeder \_\_\_\_\_

Sire \_\_\_\_\_ Dame \_\_\_\_\_

**OWNER(S) AGENT INFORMATION**

Registered Owner(s) \_\_\_\_\_

Owner's address \_\_\_\_\_

Handler's address \_\_\_\_\_

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual owner(s) whose name(s) I have entered above and accept to be bound by the rules and regulations of The Canadian Kennel Club and by any additional rules and regulations appearing in the premium list.

Signature of Owner/Handler

Telephone #

Email