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|--|---------------|--------------------|-----------------------|
| <b>GRAMPIAN GUNDOG CLUB<br/>FIELD TRIAL FOR RETRIEVERS</b> | <b>Event:</b> | <b>ID N°: 2057</b> | <b>Entries Close:</b> |
|--|---------------|--------------------|-----------------------|

**INSTRUCTIONS** This form must be used by one person (or partnership). Writing **MUST BE IN INK AND BLOCK CAPITALS**.

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 may be disqualified by the Committee of the Kennel Club. **ENTRIES FOR FIELD TRIALS WILL ONLY BE ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP.** (vide Reg J1.a, J7a and B20) and if a registered dog has changed ownership the **TRANSFER** must be applied 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.

**N.B ON BEHALF OF GRAMPIAN GUNDOG CLUB: MEMBERS ARE REQUESTED TO SIGN THIS FORM TO ENSURE THAT EACH INDIVIDUAL IS FULLY CONVERSANT WITH HEALTH AND SAFETY, RISK ASSESSMENTS & GUIDELINES, ETC. ALSO SAFETY GLASSES & EAR PLUGS ARE AVAILABLE AT ALL EVENTS FOR JUDGES & HELPERS ETC.**

**ENTRY FEES:**  
**NOVICE:**  
 Member: £40  
 Non Member: £70  
  
**OPEN :**  
 Member: £70  
 Non Member: £100

| REGISTERED NAME OF DOG | KENNEL CLUB<br>REG NO, STUD<br>BOOK N° | BREED | SEX<br>D or B | FULL<br>DATE<br>OF BIRTH | BREEDER | SIRE<br>(BLOCK LETTERS) | DAM<br>(BLOCK LETTERS) | STAKE<br>No. |
|------------------------|--|-------|---------------|--------------------------|---------|-------------------------|------------------------|--------------|
| 1                      |  |       |               |                          |         |                         |                        |              |
| 2                      |  |       |               |                          |         |                         |                        |              |

| QUALIFICATION<br>SEE SCHEDULE. | DATE: | AWARD | STAKE | PROMOTING SOCIETY | Name of Owner(s)<br>ADDRESS: |
|--------------------------------|-------|-------|-------|-------------------|------------------------------|
| 1                              |       |       |       |                   |                              |
| 2                              |       |       |       |                   | Telephone N°: Fax N°:        |

**ONE LINE FOR EACH DOG CHECK ALL DETAILS BEFORE POSTING**

**DECLARATION**  
 I/we agree to submit to & 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 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.

I/We also undertake to abide by the Regulations of this Trial & not to bring to the Trial any dog, which has contracted or be 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 the Conduct at Field Trials.

I/We further declare that I believe to the best of my knowledge that the dog(s) are not liable to disqualification under the Kennel Club Field Trial Regulations.

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

**NOTE Dogs entered in breach of Kennel Club F.T. Regulations are liable to disqualification whether or not the owner was aware of the breach.**

**Your address will appear on the card. If you do not want your address on the card please tick this box**

**See our Privacy Notice for more information. The Privacy Notice sets out how we keep your data safely and compliantly.**

**Entries and Fees MUST BE PREPAID and sent to the Retriever Secretary:**

Dr Pauline Farmer, Highbroom, Duntrune, Angus,  
 DD4 0PH

Tel: 01382 350285 or 07967100930 (mob)

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Name Of Handler  
 (In block letters)

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Telephone N°: Fax N°: