

<b>EASTERN COUNTIES GOLDEN RETRIEVER CLUB</b> <span style="float:right;"><b>K.C. ID No 1312</b></span> <b>( For Golden Retrievers only)</b> <b>NOVICE DOG, NOVICE HANDLER AND SPECIAL PUPPY WORKING TEST</b> <b>PLEASE REMEMBER TO ENTER THE TEST YOU WISH TO RUN IN</b>	<b>Date Of Test 12th AUGUST 2017</b>
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Writing **MUST BE IN INK AND BLOCK CAPITALS**.  
This form must be used by one person only (or partnership). Use only one line for each dog. The name of the dog and all details as recorded with the Kennel Club must be given on this form. If an error is made the dog may be disqualified by the Committee of the Kennel Club.  
**ENTRIES FOR TESTS WILL ONLY BE ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP, (Reg.J1a 6a(i) & 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 one. Entries not accepted without fees.**

Registered Name of Dog + ATC No.	K C Reg No	Test	Sex	Date of Birth	Breeder	Sire (BLOCK LETTERS)	Dam (BLOCK LETTERS)

Declaration: I/We agree to submit to and be bound by the Kennel Club 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. I/We also undertake to abide by the regulations of this Test and not to bring to this Test any dog which has contracted or been knowingly exposed to any infectious disease during 21 days prior to the day of the Test. I/We also declare that I am fully conversant with the Field Trial and Gundog Working Test Regulations and have studied the Guide to the Conduct of Field Trials. 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.  <b>Usual Signature of Owner(s).....Date.....</b> 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.	<b>Name of Owner(s)</b> <hr/> <b>Address:-</b> <hr/> <hr/> <hr/> <b>Tel No.</b> <hr/> Entries and Fees which <b>MUST BE PREPAID</b> to be sent to :- Dr Mike Hamilton, Orchard End, Dublin Road, Rishangles, Suffolk IP23 7QB Tel 07962 006242 <b>Entries close on Saturday 5th August 2016</b>  <b>Cheques Payable to Eastern Counties Golden Retriever Club</b>
<b>Name of Handler:-</b>	<b>Fees</b>
<b>Address (In Block Letters)</b>	Members £8.00 Non Members £10.00
<b>Tel No:-</b>	