

REGISTRATION FORM

Please circle or delete where appropriate

Date of training day

Dog/bitch KC and pet name

Dog's date of birth

Ability

Standard required - basic obedience, willing to retrieve and delivery to hand if possible

Recall to whistle	Y/N	Delivery to hand	Y/N
Heel on lead	Y/N	Experienced shot	Y/N
Heel off lead	Y/N	Steadiness	Y/N
Sit and Stay	Y/N	Stop to whistle	Y/N
Pick up a Dummy	Y/N	Hunt to whistle	Y/N
Jumping	Y/N	Blind retrieves	Y/N

I am a novice / I have a young dog and wish to be in the beginners group Y/N

I feel my dog and I are suited to the improvers group Y/N

I would like to attend as a spectator (no charge) Y/N

Please note briefly any difficulties you have experienced in your training or anything you would particularly like help with:

Owner

Address

.....

Telephone

Email

Signature of owner Date

Date of payment

Please do not bring bitches in season or unwell dogs to the venue.