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| **SOUTHERN GOLDEN RETRIEVER SOCIETY ID No.1317**  | ND/NH, S/Puppy, Novice, Veteran & Open Working Test **to be held at . Five Oaks Farm Five Oaks Billingshurst West Sussex RH14 9AZ on Sunday 3rd August 2025. PLEASE MARK WHICH TEST YOU WHICH YOUR DOG TO ENTER.** **(restricted to Golden Retrievers only) Please Circle Class Entered****PLEASE CIRCLE CLASS ENTERED**  |
| INSTRUCTIONS | Writing **MUST BE IN INK AND BLOCK CAPITALS**. This form must be used by one person only (or partnership).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 GUNDOG WORKING TESTS WILL ONLY BE ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP (vide Reg. J1.a., J7a & B20) and if a registered dog has changed ownership the TRANSFER must be applied for before the closing of entries and TAF clearly stated on this form.When entering more than one class, use if possible a separate form for each. On no account will entries be accepted without fees. | Entries To be received no later than Friday 25th July 2025 |
| Entry Fee:Members £10.00Non Members £15.00  **Per dog prepaid**  |
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|  | REGISTERED NAME OF DOG(BLOCK CAPITALS) | KC. REG. NO.,STUD BOOK NO. OR ATC NO | FULL DATEOF BIRTH | BREEDER | SIRE(BLOCK CAPITALS) | DAM(BLOCK CAPITALS) |
| 1 |  |  |  |  |  |   |
| BREED | SEX |
|  |  |
| 2 |  |  |  |  |  |  |
| BREED | SEX |
|  |  |
| Entries and Fees MUST BE PREPAID either by Cheque or Bank Transfer.On-line Banking Details Payee: “SGRS”. Sort Code: 30-92-86.Account Number 00671862 for reference write WT followed by your **FULL NAME.** **Entries to be sent to**:W/TEST Secretary Mrs S PJordan Tullys Edge Rickmans Lane Kirdford W Sussex RH14 0LD 07970707826 Please supply email address or stamped addressed envelope for directions and draw DECLARATIONI/We agreed to submit to and be bound by The Kennel Club Ltd 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 Ltd 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 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, 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 and Gundog Working Test Regulations.I/We further declare that I believe to the best of my knowledge that the dogs are not liable to disqualification under Kennel Club Regulations.Usual Signature of Owner(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. | Name of OWNER(S) (In block capitals) |
| Address:Telephone No: Email If you do not want your address on the card please tick this box □ |
| Name of HANDLER (in block capitals)Address:Telephone No: email  |