



# THUNDER BAY SCHUTZHUND CLUB



## Trial Entry Form

Please indicate:

- SchH1     SchH2     SchH3     BH     AD     FH1     FH2  
 TR1     TR2     TR3     OB1     OB2     OB3

Please print or write legibly:

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

Breed: \_\_\_\_\_ Sex: Male  Female  Degrees: \_\_\_\_\_

Birthdate: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_ Place of Birth: Canada  Elsewhere \_\_\_\_\_

Registration Number: (CKC/AKC/SZ) \_\_\_\_\_ Tattoo: \_\_\_\_\_

Sire: \_\_\_\_\_ Registration No. \_\_\_\_\_

Degrees: \_\_\_\_\_

Dam: \_\_\_\_\_ Registration No. \_\_\_\_\_

Degrees: \_\_\_\_\_

Breeder: \_\_\_\_\_ in \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code \_\_\_\_\_

Handler: (if different from owner) \_\_\_\_\_

"I hereby certify that the dog is eligible as entered. I make this entry at my own risk and agree to make no claim against Thunder Bay Schutzhund Club, its directors or members, nor the owners of the property if any damage be occasioned to or loss occur to any animal or equipment, or accident or injury to any person(s) involved at the event in question."

Date: \_\_\_\_\_ Signature of Owner/Handler: \_\_\_\_\_

Telephone No. \_\_\_\_\_ GSSCC Number: \_\_\_\_\_

Entry Fees: SchH / FH - \$45    BH / AD / TR / OB - \$35

Please note that participants entering the trial must provide a copy of the dog's registration papers and proof of membership in the GSSCC with trial entry.

*Please forward entries and cheques made payable to "Thunder Bay Schutzhund Club" to:  
Jacki Barnes – 6100 Loch Lomond Rd., Thunder Bay ON P7J 1E6*