SO	CIETY NAME:	UTILITY GUNI 24 Dog OPEN Q				22 <sup>nd</sup> /23 <sup>rd</sup> .1	10.2025	5		ID No: 499	Entries Close:	5.	.10.2025	
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 an error is made the dog may be disqualified by the Committee of the Kennel Club. ENTRIES FOR FIELD TRIA ACCEPTED FROM GUNDOGS REGISTERED AT THE KENNEL CLUB IN THE GUNDOG GROUP (vide F 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. On no account will entries									o must be g LD TRIALS P (vide Reg s.	S WILL ONLY BE g. J1.a., J7a & B20) and if	£80 r	CY FEES: nembers non members		
REGISTERED NAME OF DOG				KENNEL CLUB REG NO., STUD BOOK NO. OR ATC NO.		Breed	Sex	FULL DATE OF BIRTH	BREEDEI	R	SIRE (BLOCK LETTERS)	SIRE (BLOCK LETTERS)		Stake Date
1														
2														
										<u> </u>	*I am a member of the branch*			
QUALIFICATION SEE SCHEDULE DATE AWARD				D	STAKE	PROMOTING SOCIETY					Name of Owner(s)			
1	SCHEDOLL BATE AWA		Tiwind		STARE	TROMOTING SOCIETY					ADDRESS			
2											Telephone No: Email:			
ON	E LINE FOR EA	ACH DOG		(	CHECK A	LL DETA	ILS B	BEFORE PO	OSTING					
I/we time curr	DECLARATION  I/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 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 and not to bring to the Trial any dog which has contracted or been knowingly										Entries to be sent to: Field Trial Secretary, Peter Fulcher, 45 Nightingale Road, Ipswich IP3 0LN. Tel: 07979831551			
expo adve	osed to any infectious ersely affects its health duct at Field Trials.	days prior to	the day	1	Name Of Handler (In block letters)									
I/we 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.											ADDRESS			
Usual Signature of Owner(s)										Telephone No: Email:				

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