

Northern Working Newfoundlands - Water Test Entry Form

Venue: **MANVERS LAKE (SECTIONS A, C & E ONLY)** Date: **SATURDAY 2nd July 2022**

Please complete in **BLACK INK & BLOCK CAPITALS**

Owner(s) Details

Name(s)

Address

..... **Postcode**

Contact No **Email**

Handler Details (if different from above)

If applicable - age of Junior Handler (10 yrs, up to & including 18 yrs)

NNC Membership Number

To enter any tests the dog must be at least 6 months old on the day of the test for Section A, 9 months for Section B, 18 months for Section C & Section D & E is 24 Months **No entries will be accepted without entry fees. Please complete details below carefully - they will be used when filling out any pass certificates issued and the Test Records**

Call Name	Registered Name	Date of Birth	Sex	Colour	Test Entered	Junior Handler (tick if applicable)

All dogs MUST have obtained a pass at each Section, commencing at Section A, before entry is permitted to the next Section. Only exception for dogs who pass Section A for the **first time** may enter for Section B on the day, if the judges put them forward as capable and subject to dogs age and available time - see Regulations. All passes obtained at events organised by the Northern Newfoundland Club will be honored for NC & SNC members

Entrance Fees per Test	First Entry	Total	-
NNC Members - £8.00	Subsequent test entries £4.00	£	_____
NC/SNC Members - £10.50 (including NNC membership pending)	First Entry	Total	-
	Subsequent test entries £4.00	£	_____

- Payment Options:** **Total - £** _____
- Online Banking** : NATWEST - Sort Code 54-41-50 , Account Number : 53205405, Payment Ref : your name – *please attach proof of transaction to the Test Manager with entry form.*
 - Please make all cheques payable to **Manvers Lake-Bears**
Please note that the Online payment has changed. Payment now goes to the host working group.

I / We undertake to abide by the rules and regulations of these tests and declare that the dog(s) entered have not contracted or been knowingly exposed to any infectious disease during the previous 6 weeks and are fit and healthy to undertake the tests entered. Furthermore I/we accept that any breach of the test rules or regulations may result in disqualification.

Signature of owner(s) **Date**

Entry forms and cheques to be sent to the Test Manager. See schedule for details. If you require an acknowledgement of this entry please enclose a SAE.

For Test Manager Use Only **Please send a copy of this form to the record keeper**

Result	Pass or Fail (delete as appropriate)
Junior Points Gained	
Payment Received	Online Payment / Cheque / Cash (delete as appropriate)