

**The Thomas Dimelow****Pipe 'n' Slippers Award**

**Northern Working Newfoundlands - Pipe & Slippers and Chocolate Kisses  
Entry Form Hosted by Manvers Lake-Bears Working Newfoundlands**

**Venue:** Manvers Lake**Date:** Sunday 8<sup>th</sup> March 2025**Discipline:** Chocolate Kisses Draught Award**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** .....

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

To enter the tests the dog must be at least 7 years old on the day of the test and/OR have a physical/sensory impairment that prevents completion of the standardized tests as laid down in the Joint Regs. **Dogs entering this test due to health issues under the age of 7 may NOT enter a certified test at the same event.** No Entries will be accepted without entry fees. Please complete details below carefully - they will be used when filling out any pass certificates issued.

**Entrance Fees per Test**NNC/NC/SNC Members - £7.50  
Non Members - £9.50

Number of test entries \_\_\_\_\_ Total - £ \_\_\_\_\_

Total - £ \_\_\_\_\_

**Payment Options:****Total - £** \_\_\_\_\_

1. **Online Banking:** Sort Code 54-41-50, Account Number: 53205405 Payment Ref: your name  
– *please attach proof of transaction to the Test Manager with entry form.*
2. 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**

<b>Result</b>	<b>P&amp;S:</b> Pass or Fail	<b>CK:</b> Pass or Fail	(delete as appropriate)
Payment Received	Online Payment / Cheque / Cash	(delete as appropriate)	