

Enter in Test:

AMERICAN OFFICIAL AMERICAN KENNEL CLUB EARTHDOG TEST ENTRY FORM

Puget Sound Earthdog Club

Licensed Earthdog Tests
Events #2019525306, #2019525307, #2019525308

I enclose entry fees

in the amount of \$



AKC No. AKC Litter No. ILP/PAL No.

Emerald Meadows Farm, Bellingham, WA						
☐Sat AM	October	12	☐ Intro	□ JE	□ SE	
☐Sat PM	October	12	☐ Intro	□ JE	□ SE	
□Sun AM	October	13	☐ Intro	☐ JE	□ SE	

FEES (payable to PSEC): JE/SE/ME: \$23 Pre-Entry; \$30 (AFTER 10/4/19) Includes \$3.50 AKC Recording fee.
Second entry same dog, same test: Pre-Entry \$12; \$20 (after 10/4/19). INTRO TO QUARRY: Pre \$12.50/\$15
Send all entries to Melissa Knapp, Test Secretary, 8801 163rd Ave. NE Granite Falls, WA 98252 PRE-ENTRIES DUE 10/4/19

☐ Foreign & List Country:

Please check appropriate test and class boxes listed above.

Full Name of Dog: AKC titles only.							
Breed:	Reg. #:	Call Name:	Sex:	Date Of Birth:			
Sire:							
Dam:							
Name of Breeder(s):							
Actual Owner(s): (Print)							
Owner's Address (Street):							
City:		State:	Ž	Zip:			
Name of Owner's Agent/Han-	dler: (Print)						
Agent/Handler's E-Mail:							
Junior Handler:		Jŀ	l #:				
AKC Rules, Regulations, F		re available on the American Ken	nel Club websi	te:www.akc.org			
AGREMENT I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules and regulations of The American Kennel Club in effect at the time of this event, and any additional rules and regulations appearing in the premium list of this event and entry form and any decision made in accord with them. I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies, I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim; and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or dam age to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of							
Telephone:		Email :	· · · · · · · · · · · · · · · · · · ·				
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State State	Emerald Meadows Farm, Bellingham, WA					
J. B. G.	☐Sat PM,	October 12 October 12 October 13	☐ Intro ☐ Intro ☐ Intro	□JE	☐ SE	□ме

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Send all entries to Melicsa Knapp. Test Secretary, 8801 4307 Ave. No. Ceraite 540 W. 98252.

PDE-ENTRIES DUE 10/4/

Send all entries to Melissa Knapp						E-ENTRIES DUE 10/4/19	
Enter in Test: Pleas	e check appro	priate test	and class boxes	listed a	above.		
AKC No. AKC Litter No. ILP/PAL No.			n & List Country:	I enclose entry fees in the amount of \$			
Full Name of Dog: AKC titles only.							
Breed:	Reg. #:		Call Name: Sex: Date C			Date Of Birth:	
Sire:							
Dam:							
Name of Breeder(s):							
Actual Owner(s): (Print)							
Owner's Address (Street):							
City:			State:	-	Z	ľip:	
Name of Owner's Agent/Hand	dler: (Print)						
Agent/Handler's E-Mail:							
Junior Handler:							
to make this entry:	uly authorized						
Telephone:		Fm	ail ·				