

REGISTRATION FORM FOR
PARTICIPATING IN
C.R.H.C.

Handlers Name and Occupation

Handlers Age- _____

Handlers Contact Information- _____

Dogs Name, Age & Breed- _____

Does your dog participate in, or hold titles for hunt tests or field trials _____

What titles does your dog hold in any event- _____

Is your dog spayed or neutered- _____

If a bitch, when was the last heat cycle- _____

What Level are you registering for- Level 1 _____ Level 2 _____

Give a brief description of you and your dogs experience and activities.

Send registration plus \$30 fee to:

Jim Beverly
39 Garibaldi Ave.
Oakfield, NY 14125
716-474-4661