

DOGS NSW - RETRIEVING TRIAL RESULTS

NAME OF AFFILIATE:					DATE OF	DATE OF TRIAL:			
TOTAL DOGS ENTERE (NOVICE, RESTRICTED, A	D IN TRIAL: ALL AGE, CHAMPIONSHIP)								
STAKE	CAT PLACE	BREED	NAME OF DOG	REG NO.	SEX:	OWNER	POINTS		

	NO.							M/F			
NOVICE		1 st									
		2 nd									
		3 rd									
RESTRICTED		1 st									
		2 nd									
		3 rd									
ALL AGE		1 st									
		2 nd									
		3 rd									
CHAMPIONSHIP		1 st									
		2 nd									
		3 rd									
OTHER (STATE TYPE)		1 st									
		2 nd									
		3 rd									
	•	•	•	1	•			•		•	
				5.1.6.1.5			0.00.00				

NAME:	PHONE:	SIGNATURE:
ADDRESS:		

IMPORTANT: This form must be completed and returned, together with Dogs NSW Levy Payment WITHIN 14 DAYS OF COMPLETION OF TRIAL to:

The Secretary, DOGS NSW, P.O. Box 632, St Marys NSW 1790

Royal New South Wales Canine Council Ltd ABN 69 062 986 118 trading as DOGS NSW

Phone 02 9834 3022 or email info@dogsnsw.org.au



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ALL AGE		1 st						
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