

AGILITY DOG ASSOCIATION OF AUSTRALIA LTD

ABN 83 070 415 404



AGILITY ENTRY FORM

CLUB/GROUP HOLDING COMPETITION:		DATE OF COMPETITION:	
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*OWNER(S)					OWNER'S ADAA MEMBERSHIP NO(S)		
OWNER'S ADDRESS							
OWNER'S EMAIL					OWNER'S PHONE NUMBER		
*HANDLER					HANDLER'S ADAA MEMBERSHIP NO		
DOG'S NAME				DOG'S ADDA NO			DOG'S SEX
STANDARD, CLASS, TEST/EVENT TO BE ENTERED INTO:				DOG'S DATE OF BIRTH			HEIGHT AT WITHER
CLASS NUMBER							FEE'S
CLASS NAME							OTHER

I hereby apply to enter the foregoing exhibit in terms of and upon the conditions set out in the Schedule of Events and ADAA's Memorandum and Articles of Association and Regulations by which I agree to be bound, and I hereby certify to the correctness of the particulars endorsed hereon.

Owner(s) Signature: _____

***If the Owner or Handler is a Junior Member of ADAA, please fill out the separate Parent / Guardian permission slip and enclose with your entries.**

DETAILS OF PAIRS PARTNER	EVENT NUMBER	
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OWNER					OWNER'S ADAA MEMBERSHIP NO(S)		
DOG'S NAME					DOG'S ADDA NO:		

DETAILS OF TEAM PARTNERS	EVENT NUMBER	
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OWNER					OWNER'S ADAA MEMBERSHIP NO(S)		
DOG'S NAME					DOG'S ADDA NO:		
OWNER					OWNER'S ADAA MEMBERSHIP NO(S)		
DOG'S NAME					DOG'S ADDA NO:		
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DOG'S NAME					DOG'S ADDA NO:		
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DOG'S NAME					DOG'S ADDA NO:		