



REGISTRATION FORM (EMAIL / FAX)

Event Name: _____

Event Dates: _____

All Fields are Mandatory, this Form must be filled out COMPLETELY to be accepted & processed. Any form that is missing information, including payment information, WILL NOT be processed.

* Only ONE DOG and ONE HANDLER per Registration Form *

Fill in form, then fax completed form to 330-968-2002 or email to registration@duellingdogs.net

HANDLER'S INFORMATION

Handler Name: _____

Address: _____

City, State, ZIP: _____

Email Address: _____

Phone Number: _____ Date of Birth: _____

(MM / DD / YYYY)

DOG'S INFORMATION

Dog Call Name: _____

Breed: _____

If dog is a mixed breed indicate "Mixed Breed" and breed mix description

Color: _____ Dog Sex: _____ Dog's Date of Birth:: _____

(if unknown, estimate)

(MM / DD / YYYY)

REGISTRATION INFORMATION

Please refer to Event Listing for Pre-Registration Fees

Fill in Duel Number from event info page. Qualifying Duel availability is based on maximum available pre-registration spots and current registrations. You will be notified if a requested Qualifying Duel is full for Pre-registration.

YOU SHOULD ONLY CONSIDER YOURSELF REGISTERED ONCE YOU RECEIVE AN EMAIL CONFIRMATION.

Duel #: _____ Duel #: _____ Duel #: _____

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Duel #: _____ Duel #: _____ Duel #: _____

PAYMENT INFORMATION

Visa, MasterCard or American Express Pre-payment is REQUIRED to process your Registration

Credit Card No.: _____

Expiration Date: _____

CCV†: _____

† three digit number on back of card (or small four digit number on front if American Express)

Billing Address: _____

City / State / Zip: _____

Cardholder Name: _____

Cardholder Signature: _____