



DogHouse League Registration Form



K9 Central Pet Resort

Bowmanville, Ontario – Tue., June 13, June 20, July 4, July 11, 2017

Big Air WAVE # 1 Tue 6/13 6:00 pm
 Big Air WAVE # 2 Tue 6/20 6:00 pm
 Big Air WAVE # 3 Tue 7/4 6:00 pm
 Big Air WAVE # 4 Tue 7/11 6:00 pm
 Extreme Vertical #1 Tue 6/13 7:00 pm

Extreme Vertical # 2 Tue 7/4 7:00 pm
 Speed Retrieve # 1 Tue 6/20 7:00 pm
 Speed Retrieve # 2 Tue 7/11 7:00 pm
Iron Dog Scoring **Registration**

Fee per wave is \$20.00 – Practice After Last Wave as Time Allows (\$5)

HANDLER INFORMATION

Handler _____

Male Female Youth Handler Date of Birth: _____ / _____ / _____
MM DD YYYY

First Name: _____ Last Name: _____

Street address: _____

City: _____ State: _____ Zip: _____

Tel.: (____) _____ Email: _____

Payment: Credit Card Cash Check *(Please note pre-registration Credit Card only)*

Name on Credit Card: _____

Credit Card #: _____ Exp. Date _____
(mm/dd/yyyy)

Authorization Code:** _____ Zip of Card Billing Address: _____ Amt Charged: _____
(** three digit number on back of card following the final four number of your account)

Cardholder Signature: _____

DOG INFORMATION

Male Female Veteran Dog (8 - 9 yrs) Legend Dog (10 yrs +) Lap Dog (< 17" at withers)

Call Name: _____ Date of Birth: _____ / _____ / _____
MM DD YYYY

Breed: _____ Color: _____
(If mixed breed, please list probable breed heritage)

I agree to abide by the Rules and Regulations of DockDogs® as they are in effect at the time of this event. I further agree to be bound by the Waiver accompanying this entry form. I have voluntarily signed this release. I certify that the dog entered is not a hazard to persons or other dogs.

SIGNATURE: _____ **DATE:** _____

PLEASE FAX TO: 330-241-4976 or save and email to dd_admin@dockdogs.com. If you do not receive a confirmation email from DockDogs® within 3 business days of faxing or emailing your registration, please call to verify that we have received your league registration form.