**Registration Form:** 

Name:

Address:

Phone #:

Email #

Auditor: \$75.00 payable to Susie Bell

Handler: \$125.00 payable to Susie Bell

Dogs's call name:

Dog's age:	level of training:	Titles:
Handler's	level of training:	Titles achieved:

Susie Bell, 7111 concession 1, R.R.#2, Puslinch, Ontario NOB 2J0 What you want to focus on:

Date applied:

Cheque received: