

SOUTHERN BERKSHIRE
GOLDEN RETRIEVER CLUB
2008
WORKING CERTIFICATE AND
WORKING CERTIFICATE
EXCELLENT TESTS

SATURDAY October 11, 2008 -- 8:00 AM

Nod Brook Management Area, Simsbury/-Avon CT

Approved by the Golden Retriever Club of America

Judges

Joanne Mambrino and Harry Wert

Game and Entry-Fee

WCX – Pigeons or Pheasants/Chuckars and
Mallard Ducks -- \$35.00

WC -- Pigeons or Pheasants/Chuckars and
Mallard Ducks -- \$30.00

Entries close on October 8, 2008

Please pre-enter on enclosed form by October 8, 2008

with checks payable to SBGRC.

*Send to Secretary: Mary Maltbie, 109 Caroline Street, Apt.C,Saratoga
Springs,NY 12866*

For further information call.- (518) 727-7851,

or email to m_maltbie@hotmail.com

Dogs with WC or WCX titles may still enter test at the same level.

SOUTHERN BERKSHIRE
GOLDEN RETRIEVER CLUB
2008
WORKING CERTIFICATE
AND
WORKING CERTIFICATE
EXCELLENT TESTS

Field Trial Chair: Mary Maltbie
Captain of the Guns: David Weiss
Field Trial Secretary: Mary Maltbie
Additional Committee Members:
Virginia Goertz and Barbara Jasmine

Test will start at 8 am

Coffee and donuts compliments of the club. Many stores & restaurants nearby for lunch.

Directions: North on RT. 10/202 from its intersection with Route 44 in Avon, CT. Entrance to Nod Brook Management Area is at the Tower Business Park entrance on the right just past the Simsbury town line. Field trial signs may NOT be posted.

Wingers may be used on the WCX.

Golden Retriever Club of America, Inc
Official WC/WCX Test Entry Form

Test Giving Club: **SOUTHERN BERKSHIRE GOLDEN RETRIEVER CLUB**

Test(s) Offered: X- WC Test on: Saturday, October 11, 2008

X- WCX Test on: Saturday, October 11, 2008

Location: Nod Brook Management Area, Simsbury/Avon CT

Entries Close: October 8th, 2008

No entries taken day of the trial

Entry Fees: WC = \$30.00 WCX = \$35.00

Mary Maltbie

Mail Entries to: 109 Caroline Street,

Apt. C.

Saratoga Springs, NY 12866

518-727-7851

Call Name _____

____ This entry is for the WC Test _____ Fee \$ _____ Enclosed

____ This entry is for the WCX Test _____ Fee \$ _____ Enclosed

Breed _____	Sex _____
Dog's Registered Name _____	
Enter Number Here _____	Date of Birth _____
__ AKC Reg. No _____	
__ ILP No Place of USA Canada Foreign	
__ Foreign Reg. No & Country Birth _____	
__ Reg No _____	Applied For. _____ Will Submit _____
Breeder _____	
- _____	
Sire _____	
__ Dam _____	
- _____	
Actual Owner(s) _____	
Owner's Address _____	
City _____	State _____ Zip _____
Handler _____	
I agree that the dog named herein is entered in and will be in the test at my own risk and that I will hold the host club, its members and agents, and the land owner, free from liability for any claims arising out of the entry of the dog or its presence at the test.	
SIGNATURE _____	() _____
Of the owner or his agent duly authorized to make this entry	Telephone _____
E-mail: _____	

FOR CLUB / JUDGES' USE

NO. _____

JUDGE _____

Pass/Fail JUDGE _____