

CANADIAN ASSOCIATION OF RALLY OBEDIENCE



TRIAL ENTRY

Complete one form per dog/handler team entered and send it to
 Trial Secretary: Rebecca Hayes-Copeland, 11117-100 Street, Grande Prairie, AB T8V 2N2

Include a cheque or money order for \$20 pre-entry per Class, \$25 day of show; FEO Runs \$5 per run day of show; please make all cheques or money orders payable to: Partners Naturally

Deadline for Pre-Entries is February 20th, 2015

ABUSE TOWARDS JUDGES

An officiating judge, and/or the Chairperson of a trial, may dismiss from the trial site any person subjecting the judge or members of the organizing committee to abuse, whether that person is competing in the trial or not.

Trial Date	March 1st 2015. Doors open @ 8:00am; Trial starts @ 8:30am on Sunday 2nd Trial Starts @ 1pm on Sunday		
Trial Location	Partners Naturally, 11117-100 Street, Grande Prairie, AB		
Organization	Partners Naturally www.partnersnaturally.ca 780-513-4074		
Class Entered:	March 1st Trial 1: 8:30 AM		
	<input type="checkbox"/> Novice A <input type="checkbox"/> Advanced A <input type="checkbox"/> Excellent A <input type="checkbox"/> Versatility <input type="checkbox"/> Novice B <input type="checkbox"/> Advanced B <input type="checkbox"/> Excellent B <input type="checkbox"/> Versatility Excellent <input type="checkbox"/> Novice Team <input type="checkbox"/> Advanced Team <input type="checkbox"/> Excellent Team <input type="checkbox"/> Please check here if entering C Stream		
	March 1st Trial 2: 1pm		
	<input type="checkbox"/> Novice A <input type="checkbox"/> Advanced A <input type="checkbox"/> Excellent A <input type="checkbox"/> Versatility <input type="checkbox"/> Novice B <input type="checkbox"/> Advanced B <input type="checkbox"/> Excellent B <input type="checkbox"/> Versatility Excellent <input type="checkbox"/> Novice Team <input type="checkbox"/> Advanced Team <input type="checkbox"/> Excellent Team <input type="checkbox"/> Please check here if entering C Stream		
	Judge for both Trials: Sarah-Jane Petti		
Dog's Name		Dog's Breed	
Dog's CARO Reg. #:		Dog's Height (inches) at shoulders	
Dog's Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Dog's Date of Birth	____ / ____ / ____ <small>Year / Month / Day</small>
Owner's Name:		City:	
Address:		Province/ Postal Code	/
Phone:	(_____)	Fax:	(_____)
Email Address:			
CARO Membership:	<input type="checkbox"/> Junior Handler		