



North American Teckel Club



Begleithund BHP1 BHP2 BHP3

Test Entry Form mark the test(s) you are taking and complete one entry form per dog

Test Date: _____

- | | | |
|-----------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> Smooth | <input type="checkbox"/> Standard | Color _____ |
| <input type="checkbox"/> Wirehair | <input type="checkbox"/> Zwerg | Tattoo # _____ Location _____ |
| <input type="checkbox"/> Longhair | <input type="checkbox"/> Kaninchen | Microchip # _____ Location _____ |

Registered name of dachshund _____

FCI conformation rating _____ FCI performance awards _____

Date of birth _____ Sex _____

DTK Registration # _____ or AKC/CKC registration # _____

Sire (include Reg.#) _____

Dam (include Reg.#) _____

Breeder _____

Breeder's Address _____

Owner(s) _____

Owner's Address _____

Owner's Phone _____ E-mail _____

Handler _____

I CERTIFY that I am the actual owner of this dog and that this dog has been vaccinated against rabies and all other applicable diseases. In consideration of the acceptance of this entry, I agree to abide by all the Rules of the Deutscher Teckelklub and the procedures governing this event and any decisions made in accord with them. I further agree that the dog is entered in and will be at this event at my own risk and that I will hold the North American Teckel club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at this event.

Signature _____

Date _____

Enclosed is a check for the amount of US \$ _____.