



National Bulldogge Association

Official NBA Rally Entry Form

Please complete the form below and mail to the address at the bottom of this page or bring to the walk-in registration.

PLEASE PRINT Handler name: _____ Address: _____ Phone: _____ E-Mail: _____ Owner name: _____	Please check the class you are registering for: <input type="checkbox"/> Rally Obedience Novice <input type="checkbox"/> Rally Obedience Intermediate <input type="checkbox"/> Rally Obedience Excellent
DOG INFORMATION Name of dog: _____ NBA #: _____ DOB: _____ Sex of dog: _____	Class Date/Trial (see schedule on web page): Class Date: _____ <input type="checkbox"/> Trial 1 <input type="checkbox"/> Trial 2 <input type="checkbox"/> Trial 3 <input type="checkbox"/> Trial 4 Rally Titles Earned To Date: <input type="checkbox"/> NBA-RN <input type="checkbox"/> NBA-RA <input type="checkbox"/> NBA-RE <input type="checkbox"/> NBA RAE

Entry Fee is \$25 per dog per trial and \$15 for each additional trial at the same event.

Total Amount Enclosed: \$ _____

IMPORTANT INFORMATION – PLEASE READ AND SIGN BELOW

I hereby acknowledge and agree that any injury or damage inflicted by any dog owned or handled by me at any National Bulldogge Association event is my responsibility and shall not be the responsibility of the NBA registry/club or result in any liability to the said club, its judges or ring stewards. I further acknowledge and agree that no other club member or any other person of the National Bulldogge Association shall be responsible or liable for injury or damage to any person, or for the loss of or injury to my property. I fully understand that the National Bulldogge Association and its members and judges accept and assume no responsibility for the action of the animals attending and/or participating in the event, which may result in liability. I fully acknowledge that it is my responsibility to maintain absolute control over my own dog(s) while attending this event by means of proper leads and/or crates and I agree to keep a safe distance between my dog(s) and other dogs at this event. I agree to observe and be bound by the event rules aforementioned by the National Bulldogge Association and hereby acknowledge and accept receipt of the event regulations.

Handler signature: _____ Date: _____

Parent Signature: _____ Date: _____

(Required if handler is under 18 years old)

Please mail this form with payment to:

National Bulldogge Association

P.O. Box 293

Pelham, TN 3736