OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION Request for ASFA Lure Chasing Instinct Registration Number

Fee Paid _____ This form is for dogs without any registration number from another registering body.

Please print legibly.

Breed:	Call Name:			
Registered Name of Dog:				
FTS will circle Size after wicketing at Inspection: Size Small: up to 17½ inches (or brachycephalic) Size Large: over 17½ inches				
Registration Number: (To be assigned by ASFA records coordinator.)				
Date of Sex: Birth: Dog		Bitch		
Name of actual owner(s):				
Address:		Phone:		
City:			State:	Zip:
E-mail		Region of Residence: (Optional)		
Emergency Contact Name and Phone				

This top portion is to be submitted with <u>the \$10 fee</u> to the Field Trial Secretary. First time trial entry on separate form.

* * * * * * * * * * * * * * * *

	was entered in the
(Dog's Name)	(ASFA Club Name)
ASFA trial held on(Date) registered as Size	The dog was wicketed at inspection and is The fee of \$10 was received by the FTS and
submitted to the ASFA Records	s Coordinator.

Printed name of Field Trial Secretary

Signature of Field Trial Secretary

(Owner is to retain this receipt as proof of registration until notified by the ASFA.)

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Registration Number	r: (To be assigned by ASFA records coordinator.)
Date of Birth:	Sex:
Name of actual owner(s):	
Address:	Phone:
City:	State: Zip:
E-mail	Region of Residence: (Optional)
Emergency Contact Name and Phone	I

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EF-LCI ~ rev 01/20©