



LV/DVG AMERICA TRIAL ENTRY

Deutscher Verband der Gebrauchshundsportvereine e.V.
Sportverband für das Polizei- und Schutzhundwesen-Mitglied des VDH und der FCI

HOST CLUB NAME, DVG # _____ CLOSING DATE _____
Month/Day/Year

TRIAL CHAIRMAN'S NAME _____ DVG MEMBER # _____

TRIAL CHAIRMAN'S ADDRESS _____

TRIAL DATE _____ TRIAL LOCATION _____
Month/Day/Year City, State

<input checked="" type="checkbox"/>	BH	AD	IPO			IPO-A			IPO		TR			OB			PR			FH		IPO	
<input type="checkbox"/>			1	2	3	1	2	3	ZTP		IPO-V	1	2	3	1	2	3	1	2	3	1	2	FH
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CHIP _____

DOG'S NAME _____ SCOREBOOK # _____ TATTOO _____

DOG'S DATE OF BIRTH _____
Month/Day/Year M F BREED _____ REGISTRATION # _____

OWNER'S NAME _____ DVG Number _____ PHONE _____

OWNER'S ADDRESS _____

OWNER'S DVG CLUB and # _____ EMAIL _____
Please indicate club and organization if not DVG member

HANDLER'S NAME _____ DVG Number _____ PHONE _____

HANDLER'S ADDRESS _____

HANDLER'S DVG CLUB and # _____ EMAIL _____
Please indicate club and organization if not DVG member

Please list the last three trials the dog was entered in. Scorebook proof issued for the dog's previous performances must be submitted with application

Trial Location & Date	Scores			Total Score	Rating	Title	Judge
	A	B	C				

Owner/Handler's Statement: In submitting this application, I recognize the trial rules of the VDH and the DVG. I enclose the entry fee or will send it by mail. I am aware that I must pay the trial entry fee even if I should not be able to participate in the trial for whatever reason. I am fully liable for any damage caused by my dog. All entry information on this application is true and correct.

Date _____ Month/Day/Year Owner/Handler's Signature _____

Training Director's Certification for DVG members: I certify that the above mentioned dog is, by level of training, capable of undergoing trial.

Date _____ Month/Day/Year Training Director's Signature _____ DVG# _____