**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  Birth: | | Sex:  □ 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 the $10 fee 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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The dog was wicketed at inspection and is**

**(Date)**

**registered as Size \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The fee of $10 was received by the FTS and**

**submitted to the ASFA Records 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.)OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION**

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| Date of  Birth: | | Sex:  □ Dog □ Bitch | | |
| Name of actual owner(s): | | | | |
| Address: | | | Phone: | |
| City: | | | State: | Zip: |
| E-mail | | | Region of Residence: (Optional) | |
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