



Four Counties Beagle Club

Please return to: Lynn Bailey, 29 Albert St, Seaham, Co. Durham, SR7 7LJ

Name: _____ **Affix:** _____

Address: _____

Telephone: _____ **Email:** _____

Please list any dogs which you own that are listed in the Kennel Club Stud Book:

Name of Dog	Stud Book Number
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please indicate if your name appears on any other breed club lists:

Name of Society	List (eg A2, B etc)
_____	_____
_____	_____
_____	_____

Have you attended and passed the following:

KC Regulations & Judging Procedures	Passed Yes/No	Date: _____
KC Confirmation & Movement	Passed Yes/No	Date: _____
KC Hands on Assessment	Passed Yes/No	Date: _____
Beagle Specific Seminar & Assessment	Passed Yes/No	Date: _____

Completed Stewarding Appointments

Please list below details of shows at which you have stewarded. Appointments that have not been completed should not be listed.

Society Name	Date	Show Type	No. of classes	Judge

I hereby declare that the information I have provided is correct. If any of the information changes, I agree to inform the Four Counties Beagle Club immediately.

Signed: _____ **Date:** _____

Please return all completed forms and copies of certificates to Lynn Bailey, 29 Albert Street, Seaham, Co. Durham, SR7 7LJ.