Connecticut Working Dog Club
Fall 2026 Trial

Handler Information

Name_____ Phone # ( )_____-_____

Address_____

City_____ State_____ Zip_____

Club Affiliation_____

USCA/other membership #_____

Date/Location 1st Bh was

obtained_____

Dog Information

Dogs Name_____

Breed_____ Male____ Female____

DOB____/____/____ H.O.T. - Yes_____ No_____

Owner (if other then handler)_____

Registration #_____

Scorebook #_____

Tattoo#_____ Microchip#_____

Existing Titles_____

Title Entering for_____

BH and AD $75
All other titles $125
None USCA members, additional $50 fee

Please submit your entry form, payment (Check or Venmo), copy of your current membership card and current/up to date rabies certificate to

CT Working Dog Club
c/o David Caruso
361r Wallingford Road
Durham, Ct 06422

Venmo David-Caruso-58

Checks made out to David Caruso — DOG TRIAL in the memo

I here by agree to abide by the CT Working Dog Clubs rules and regulations and follow all rules and instructions issued by the trial secretary, chairmen and/or judge. I further agree to indemnify and hold harmless the CT Working Dog Club, its officers, trial officials and individual members, along with the owners of the premises on which the event is held, from any and all claims made as a result of any action by any individual or dog, including the dog I am handling.

Signature_____ Date_____

E-mail Address_____