

Results Form For The IBHF PURINA CUP Award

MUST be sent in by the owner of the beagle ... **MUST** include the following information:

OWNER'S NAME:

ADDRESS:

CITY: STATE: ZIP

MUST HAVE PHONE NUMBER:

NAME OF PLACING HOUND:

SIRE:

DAM:

BREEDER'S NAME:

HANDLER'S NAME:

PLACES DURING FUTURITY YEAR (Must be AKC/CKC Licensed Trials)

PLACE: CLUB: DATE:

P PLACE: CLUB: DATE:

PLACE: CLUB: DATE:

PLACE: CLUB: DATE:

PLACE: CLUB: DATE:

PLACE: CLUB: DATE:

PLACE: CLUB: DATE:

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PLACE: CLUB: DATE:

(Attach Separate Sheet For Additional Places)

Return Completed Form To:

DEBORAH BROWN, 502 Guild Hill Road, Waterbury Center, VT 05677

Phone: (802) 244-8507 for Questions (5:00 PM - 9:30 PM)