POOLE'S FOXHOUND TRAINING PRESERVE ENTRY FORM

(434) 634-2874

Name of Hunter

Kennel Name

Street Address (NO PO Box)

Date of Hunt

City State Zip

Derby ☐

All-Age ☐

Telephone No.: (Area code)

Certification by Hunter:
I certify that the dogs entered into this hunt are current on their rabies vaccinations.

Hunter's Signature

NOTE: Due to VDGIF regulations, hunters may be disqualified from hunt for failure to complete the required information above.

Dog No.	Dog Name	Sire	Dam	Name of Breeder	Color	Sex