

NATIONAL OVAL TRACK RACING ASSN.
QUICK ENTRY FORM
FOR DOGS WITH NOTRA REGISTRATION NUMBERS
BWRC

LOCATION OF MEET:		DATE:		RACING SECRETARY:	
BC, Canada					
NOTRA NUMBER *	CALL NAME	REGISTERED NAME OF DOG		TITLES	

* Please include breed prefix (i.e. W=whippet, G=greyhound, etc.)

AMOUNT ENCLOSED: \$ _____

I and my heirs, legal representatives and assigns shall hold harmless and defend from any claim for personal injury, illness or property damage arising out of participation in this race meet, its officers, The BC Whippet Racing Club, its officers, directors, committees, agents, and members, and the National Oval Track Racing Association, its officers, directors, committees, agents, and members. I agree to abide by the Official Rules and Regulations for Sighthound Oval Racing in effect at the time of this race meet.

Mailing Address

Actual owner of entry or agent
duly authorized to make this entry

Date

Address

City, State/province & Zip

Telephone Number