



Companion Class – 2018



ENTRY (No Entry Fee)

For More Information: Contact Dee Jones, lagniappehounds@att.net

Dog's Call Name: _____

Dog's Registered Name: _____

(Optional)

Owner's Name: _____

(Handler, if other than Owner)

Dog's Age: _____

Please write a short paragraph to be read while your dog is presented. Tell us why this dog is special. Tell us about his/her favorite things. Tell us whatever you wish. Use the back, if you need it. **MAKE IT LEGIBLE. Use back, if needed.**