



PAIRS TOURNAMENT ENTRY FORM

U-FLI Tournament Information				
				Tournament Name/Location:
Host Club:		Tournament Date:	Closing Date:	
Entry Fee:		Tournament Director:	Tournament Director:	
	U-FLI Pairs	Racing Information		
Team Name:		Seed Time:	Seed Time:	
	U-FLI Pairs Clas	s Participant Informatio	n	
Dog #1			Dog #2	
Participant Name:		Participant Name:	Participant Name:	
Participant U-FLI Club# Affiliation (If applicable):		Participant U-FLI Club# /	Participant U-FLI Club# Affiliation (If applicable):	
Address:		Address:		
City:		City:		
State/Province:	Zip/Postal Code:	State/Province:	Zip/Postal Code:	
Phone #:		Phone #:		
Email Address:		Email Address:		
Dog's Name:		Dog's Name:	Dog's Name:	
U-FLI RUN #:	Breed:	U-FLI RUN #:	Breed:	
directors, agents, employ	the Rules and Regulations of Unit rees, and the host club assume no exhibitors, or handlers, or to any of	responsibility for any loss, accide	nc. (U-FLI™). U-FLI™, its officers, nts, theft, damage, death, or injury	
			U-FLI™, its officers, directors, agents, y and/or my club's/team's participation	

I acknowledge that the current U-FLI™ Rules and Regulations have been made available to me, and that I am familiar with their contents. My signature indicates that I understand and agree to the above and to abide by all of the current U-FLI™ Rules and Regulations.

By signing this document, I acknowledge that I have the authority to sign and accept the conditions contained herein on behalf of myself, my Club, my Team, and any persons who may accompany myself and my club and/or team at this U-FLI™ event.

Signature:	Date: