

**WESTERN MASS BIRD
DOG CLUB**

**PO BOX 82
CHICOPEE, MA 01014**

Entry Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone# _____

Fax# _____

Email _____

NSCA#: _____ Class: _____

Preferred Squad: must be PAID and submitted together.

1- (Yourself) _____

2- _____

3- _____

4- _____

5- _____