



CANADIAN KENNEL CLUB

CLUB CANIN CANADIEN

200 RONSON DRIVE, SUITE 400, ETOBICOKE, ONTARIO M9W 5Z9 TEL: (416) 675-5511 FAX: (416) 675-6506 WEB SITE: www.ckc.ca

VERIFICATION OF OBEDIENCE MATCH JUDGING ASSIGNMENT

SECTION 1 (To be completed by applicant)

Name, Membership No., Mailing Address, City, Province, Postal Code

SECTION 2 (To be completed by the event-holding club)

Name of Club, Name of Match Secretary, Date of Event, Type of Event: All-Breed, Specialty

ASSIGNMENT (Please indicate below the assignment)

NOVICE A, NOVICE B, OPEN A, OPEN B, UTILITY, OTHER. No. of Dogs: \_\_\_\_\_

If "other selected, please specify: \_\_\_\_\_

ADDITIONAL COMMENTS

Blank lines for additional comments

Signature of Applicant, Signature of Event Secretary, Date, Date



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VERIFICATION OF OBEDIENCE RING STEWARDING ASSIGNMENT

SECTION 1 (To be completed by applicant)

Name, Membership No., Mailing Address, City, Province, Postal Code

SECTION 2 (To be completed by the event-holding club)

Name of Club, Name of Match Secretary, Date of Event, Type of Event: All-Breed, Specialty

ASSIGNMENT (Please indicate the number of dogs in each class)

First Trial: # of Dogs in, Novice, Open, Utility, Total, Duration, Name of Judge, Signature of Judge

Second Trial: # of Dogs in, Novice, Open, Utility, Total, Duration, Name of Judge, Signature of Judge

Third Trial: # of Dogs in, Novice, Open, Utility, Total, Duration, Name of Judge, Signature of Judge

Fourth Trial: # of Dogs in, Novice, Open, Utility, Total, Duration, Name of Judge, Signature of Judge

ADDITIONAL COMMENTS

Empty box for additional comments

Signature of Applicant

Date

Signature of Event Secretary

Date