

## **American Kennel Club Junior Handler Number Request**



Please complete, sign, and date this form in order to obtain a Junior Handler number for your child. Please return the completed form as indicated at the bottom of the form and keep a copy for your records.

<b>Junior Information</b>							
	Date	of Birth (m	m/dd/yyyy)				
First Name		Last Name					
Mailing Address 1		Mailing A	Address 2_				
City S	State/Pro	ov	_ Zip Code	e		Country	
Home Phone		Email Ac	ldress				
Please add my child to the list to receive the Junior	's E-Ne	wsletter:	Yes	No	(Check o	ne)	
Is your junior involved in 4-H: Yes No	(Check	one)					
Does the mailing address for the Junior match the mai	iling ado	dress for th	ne Parent/G	uardian?	Yes	No	(Check one)
Parent/Guardian Information							
First Name		Last Name					
Mailing Address 1		Mailing A	Address 2_				
City S	State/Pro	ov	_ Zip Code	e		Country	
Home Phone		Email Ac	ldress				
By completing and signing this form, I give my con- Handler number. I further give my consent to the A- information to third parties with whom the America statistics.	mericar	Kennel (	Club to pro	vide my c	hild's na	ame and r	anking points
Parent/Guardian Signature				Ι	Date		

**Return Application to:** 

**AKC/Juniors** PO Box 900059 Raleigh, NC 27675 email: juniors@akc.org

Fax: (919) 816-3770