

HOUND APPLICATION

Event #:	Club Name:				
(if known)	Licensed Club: ☐ Member Club: ☐				
Date Start:	Site Name:				
Date End:	City, State:				
Is this a National Championship?	***(required) Zip:				
Yes: □ No: □ LA	TE APPLICATIONS subject to a minimum \$50 PENALTY				
Applications must be submitted for Licensed of	r Member events <u>3 MONTHS</u> prior to event.				
ALL items must be received in order to approv 1. EVENT APPLICATION 2. COMPLETED JUDGES PANEL	Member Clubs = \$35 per event				
 APPLICATION FEE Club Membership must be submi 	No fee for first event within a yearitted yearly \$15 each additional event per year				
ONCE AN EVENT HAS BEEN APPROVED, NO REFUNDS W	/ILL BE ISSUED FOR THE APPLICATION FEES OR FINES				
· _ · _ ·	t Emergency Plan will be available at the event. onger needs to be submitted with application.				
	please send us an email or call: 919-816-3776 vith an online account.				
PO Box 9 Raleigh,	ance Event Operations 200051 NC 27675-9051 2-816-4211				
•	-816-3908 (M-F 8:15am - 4:30pm EST) erformance_events@akc.org				
Location of Headquarters & Running Grounds: (Please provide a specific address and directions)				
Will Derby Classes be offered?	YES NO ENTRY FEE: \$				
Will Field Champion Classes be offered? (Only dogs recorded as FC in AKC records are eligible to enter)	YES NO ENTRY FEE: \$				
TRIAL TYPE: (check one) SP SPO G	DB Brace LP 2 Couple				

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Hounds in each class will be measured from AM to AM on day class is run. Hounds in each class will be measured from PM to PM ENTRY FEE: \$	FOR LARGE PA	CK TRIALS ONLY:				
ENTRY FEE: \$	Hounds in each c	lass will be measured from	n AM 1	to A	M on day clas	ss is run.
ENTRY FEE: \$	Hounds in each c	lass will be measured from	n PM	I to	PM	
CLASS / PACK: RUNNING DATE: CLOSE & DRAWING TIME: JUDGE#: FULL NAME: CITY, STATE CLASS: DERBY-JUDGE #: FULL NAME: CITY, STATE DERBY CLASS:						
JUDGE#: FULL NAME: CITY, STATE CLASS: DERBY-JUDGE #: FULL NAME: CITY, STATE DERBY CLASS:	ENTRY FEE: \$	WILD RAB	BBIT HARE	☐ WILD RABE	BIT & HARE	
DERBY-JUDGE #: FULL NAME: CITY, STATE DERBY CLASS:	CLASS / PACK:		RUNNING	DATE:	CLOSE & I	DRAWING TIME:
DERBY-JUDGE #: FULL NAME: CITY, STATE DERBY CLASS:						
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DERBY-JUDGE #: FULL NAME: CITY, STATE DERBY CLASS:						
	JUDGE#:	FULL NAME:	CIT	Y, STATE		CLASS:
	DEDDY IIIDAE	#. FILL NA	ME-	CITY CT	· A T.F	DEDDY OLACO
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:	DERBY-JUDGE	#: FULL NAM	VIE:	CIIY, SI	AIE	DERBY CLASS:
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
FC-JUDGE #: FULL NAME: CITY, STATE FC CLASS:						
	FC-JUDGE #:	FULL NA	ME:	CITY, ST	ATE	FC CLASS:

*** Field Trial Secretary and Field Trial Chairman CANNOT be the same person ***

FIELD TRIAL SECRETARY:			
Address:			
Phone:	Other Phone:		
Email:			
STANDARD AKC RIBBONS	OR ROSETTES	to all placed hounds.	
FOR NBQ, specify AKC RIBBONS	OR ROSETTES	to be offered.	
LIST ANY CASH OR TROPHIES OFF	ERED:		
FIELD	TRIAL COMMITTEE - Li	st at least 5 Members	
FIELD TRIAL CHAIRMAN:			
Address:			·
Phone:	Other Phone:		
Email:			
Member (1):	Mer	nber (2):	
Member (3):			
Member (5):			
	PLEASE LIST CLUB	OFFICERS:	
PRESIDENT:		Phone:	<u> </u>
Address:			
Email:		Other Phone:	
VICE PRESIDENT:		Phone:	
Address:			
Email:			
SECRETARY:			
Address:			
Email:			
TREASURER:			
Address:			
Email:		Other Fhohe	
Officer's Name:			
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Officer's Signature:			