



American
Kennel Club



CGTK02

AKC Trick Dog Title Application

I. Applicant Information

First Name:

Last Name:

Mailing Address:

City:

State:

Zip Code:

Telephone:

Email Address:

II. Dog Information

AKC Number (list the number for the one category below that applies to your dog):

AKC Registration number

AKC PAL number

AKC Canine Partner number

Dog name (show full registered/listed name)

"call" name-what do you call her/him:

Breed:

Mixed Breed

Purebred if so, list breed:

III. Title Applied for: (check all that apply)

Novice

Intermediate

Advanced

Performer

V. Payment Information (please send \$20 per title applying for)

I have enclosed a \$20 Money Order or Check#: _____ made payable to AKC.

I need an AKC Canine Partners number and have attached the form for the number (\$19)

Charge my: AmEx Discover MasterCard Visa

Account Number:

Exp. Date: ____ / ____

Printed Name:

I (We) hereby certify:

I certify that the information given in this application is true and accurate. I understand and agree that approval for the AKC Trick Dog title is not guaranteed. I agree that any cause of action, controversy, or claim arising out of or related to this application, or as to the construction, interpretation and effect of this agreement shall be settled by arbitration pursuant to the applicable rule of the American Arbitration Association. However, prior to arbitration, all applicable AKC bylaws, rules, regulations, and procedures must first be followed as set forth in the AKC Charter and Bylaws, Rules, Regulations, and published policies and guidelines

Applicant's signature

Date