

are subject to a minimum \$50.00 penalty.

AKC Performance Events Department 8051 Arco Corporate Drive, Suite 100 Raleigh, NC 27617 Fax: (919) 816-4211

E-mail: Coursing@akc.org

## **COURSING ABILITY TEST APPLICATION & JUDGES PANEL**

Club Name

LVCIII	
	Site (Name)
Date S	Site Street Address
	City, State
	is being held in conjunction with: [Show, Cluster, National Specialty, etc];
<u>Please</u>	e read instructions and application carefully before completing:
For AK • •	C approval, the following information must be submitted: Completed Application including name of Judge Application Fee (\$35.00 for each event) Please pay Coursing Ability Test application fees separate from regular Lure Coursing event application fees. If fee is not submitted with Event Application, clubs may either call the Performance Events staff (919-816-3908) for credit card payment or mail check to address shown above. Include with check the full name of club, event type and event dates.
	The club certifies that a completed Disaster & Emergency Plan will be available at the event. By checking this box, a completed plan no longer needs to be submitted with the application.
•	A separate application is required for each Coursing Ability Test (up to 12 Tests per calendar year).
•	Incomplete applications and/or applications received without the required fee(s) will not be approved
•	Test Secretary or Chairperson cannot judge at this event
•	Applications MUST be received at least <u>90 days</u> (3 months) prior to the start date. Late applications

• Premium lists are required for stand alone tests, a copy of which must be sent to AKC at the time it is sent to prospective entrants.

Once a test has been approved, no refunds will be issued for the application fee.

• Coursing Ability Tests held in conjunction with a Lure Coursing Test or Trial may use the same premium list, however a separate event application form, event secretary's report and results form must be submitted.

This event is held under the Rules and Procedures of the American Kennel Club. The information on this form, when approved by the AKC, shall be final and no changes may be made without AKC authorization.

Fvent #

	_								
Entry Closin		 Time							
CLUB OF	FICERS:		_						
President	Name	Phone Number							
	Complete Street Address	Email Address							
VP									
	Name	Phone Number							
	Complete Street Address	Email Address							
Secretary	Name	Phone Number							
_	Complete Street Address	Email Address							
Treasurer	Name	Phone Number	<u></u>						
	Complete Street Address	Email Address							
Event									
Secretary	Name	Phone Number							
	Complete Street Address	Email Address							
Event Chairman	None	Dhara Niveshar							
Chairman	Name	Phone Number	· 						
Tost Comm	Complete Street Address	Email Address							
	ittee Members: (minimum								
Name		Name							
Name		Name							
Name		Name							
Coursing Ability Test Judge:									
Judge #	Name	Complete Address	Phone						

Judge #	Name	Complete Address		Phone	
			Signature of Club Office	er	Date
			Printed Name and Title	of Club Officer	

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