



**AKC Scent Work
Event Application**

This application must be received by the American Kennel Club with the appropriate fees at least **18 weeks prior** to the closing date of the Trial or Junior Showcase for the club to be in compliance with Chapter 3, Section 2 of the *Regulations for AKC Scent Work*. Applications for a Sanctioned Match must be received by the American Kennel Club at least **four weeks prior** to the closing date of the Match. Please complete all three pages of the application.

A separate application is required for each Trial, Showcase, or Match. Money penalties may be imposed or applications may be rejected for noncompliance. This event application and judges panel may be submitted using the AKC Online System at www.akc.org or send completed applications with appropriate fee to: **American Kennel Club, Event Operations, PO Box 900051, Raleigh, NC 27675-9051.**

SECTION 1. CLUB INFORMATION

EVENT NUMBER (IF KNOWN)	NAME OF CLUB	EVENT DATE
NAME OF THE SEARCH LOCATION		
EXACT ADDRESS OF THE SEARCH LOCATION		

SECTION 2. TYPE OF EVENT (choose one)

- AKC Licensed or Member Club Event:** \$35 application fee for each event. Dogs qualifying at licensed and member club events receive credit toward titles.
- AKC Junior Showcase Event:** No application fee required. Open only to dogs handled by persons age 18 or younger on the date of event. Dogs qualifying at Junior Showcase events receive credit toward titles. Recording fees are required.
- AKC Sanctioned B Match:** \$10 application fee for each match. Dogs qualifying at sanctioned matches receive no credit toward titles. Recording fees are not required.

Use a separate application for each event. No refund of fees for cancelled events once application is processed.

SECTION 3. PAYMENT INFORMATION

Payment will be submitted online or at a later time (*event will be pended until payment is received*).
 Payment will be by check (enclosed).

Payable to: AKC Event Plans Department
 PO Box 900051
 Raleigh, NC 27675-9051

Payment Amount:
 \$ _____

Payment will be by credit card:

NAME ON CARD _____
 ADDRESS _____
 CITY, STATE & ZIP _____
 EMAIL (REQUIRED) _____
 PHONE # (REQUIRED) _____

Payment Method:

Visa	Mastercard	Discover	AMEX
<input style="width: 100%; height: 20px;" type="text"/>			<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>
Account Number			Expiration Date

SECTION 4. AUTHORIZATION TO APPLY TO HOLD THIS EVENT

CLUB OFFICER SIGNATURE	CLUB OFFICER TITLE	DATE
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Name of Club: _____

Event Date: _____

SECTION 5. EVENT SECRETARY AND EVENT CHAIR

All information is REQUIRED.

Event Role	Name and Complete Mailing Address	Daytime Phone #	Evening Phone #
Event Secretary	Provide address where entries should be sent. Email: _____		
Event Chair (must be a club member)	Email: _____		

SECTION 6. INDICATE THE METHOD OF ENTRY (choose one)

An * identifies a required field in this section.

Mark time zone where entries will be received*: Atlantic Eastern Central Mountain Pacific

A) LIMITED TRIAL

TOTAL NUMBER OF RUNS AT THIS EVENT*: _____

First Received: Opening Date*: _____ And Time*: _____ AM PM
 Closing Date*: _____ And Time*: _____ AM PM

Random Draw: Opening Period, Start Date*: _____ And Time*: _____ AM PM
 Opening Period, Finish Date*: _____ And Time*: _____ AM PM
 Random Draw Date*: _____ And Time*: _____ AM PM
 Closing Date*: _____ And Time*: _____ AM PM

Random Draw Location* : _____

(must provide complete address, city, state, zip code) _____

B) UNLIMITED TRIAL

Opening Date* and Time*: _____ Closing Date* and Time*: _____

SECTION 7. ADDITIONAL EVENT INFORMATION (complete all questions to avoid a delay in event approval.)

Open to all breeds? YES NO Open to single breed or group? NO YES Breed or Group: _____

Do any breeds need to be excluded because of conflicts? YES NO If so, which?: _____

Event will be held: INDOORS OUTDOORS (Under cover? YES NO) BOTH

SECTION 8. ENTRY FEES PER DOG

1st Entry Fee \$ _____ Additional Entries \$ _____

Name of Club: _____

Event Date: _____

SECTION 9. JUDGE PANEL

Clubs may offer any combination of classes. If class is not being offered, please mark "NOT OFFERED." Class offerings and judge assignments may be modified any time until the publication of the Premium List. For any questions please contact your AKC Companion Operations representative directly or email EventPlans@akc.org.

Container Element		Exterior Element	
	Judge's Name, Judge's Number City, State		Judge's Name, Judge's Number City, State
Novice		Novice	
Advanced		Advanced	
Excellent		Excellent	
Master		Master	
Interior Element		Buried Element	
	Judge's Name, Judge's Number City, State		Judge's Name, Judge's Number City, State
Novice		Novice	
Advanced		Advanced	
Excellent		Excellent	
Master		Master	
The Detective Class		Handler Discrimination	
	Judge's Name, Judge's Number City, State		Judge's Name, Judge's Number City, State
Detective		Novice	
		Advanced	
		Excellent	
		Master	

SECTION 10. JUDGE PANEL SUBMISSION

Submitted for AKC approval by (Please Print)

Club Position*

Date

*If not Event Chairman, please indicate Event Chairman's name, address, telephone number and email address below.

Trial Chair's Name

Address

Telephone

Email