THE LABRADOR RETRIEVER CLUB, INC

Conformation Certificate Official Evaluation Application

Date:_____ Location/Event:_____

Event Chair: Please forward a copy of this form, CC Results and Dilute Evidence if available to:

Betty Dust, PO Box 266 Lisbon MD 21765 or email to lrc_wc@milltowne.com

Check One: **Dilute Clear** ____DNA evidence attached ___will be forwarded to Betty Dust

Registered Name:_____

Registration Number_____

Foreign Registration:_____ Country of Registry_____

Call Name:_____Color:_____ Sex:_____Date of Birth:_____

Breeder_____

Sire:_____

Dam:_____

Actual Owner(s):_____

E-Mail:_____ Phone:_____

Address:_____

City:_____State:_____Zip_____

I certify that I am the actual owner of the dog, or the duly authorized agent of the actual owner of the dog who has been entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules of the Labrador Retriever Club, Inc and any decisions made in accord with them. I(we) agree that the dog entered in and present at the test will be at my own risk and I(we) will hold the test giving club, its member and agents free from liability arising out of the entry or its presence at the event.

Name of Handler(Print):_____

Signature_____
Of owner or agent duly authorized to make this entry

Please Circle One: Applicant DID or DID NOT receive CC award. Reason:_____

CC Judge Signature:_____

REV 1.0 9/26 ALL OTHER FORMS ARE OBSOLETE