

ALASKAN MALAMUTE CLUB OF AMERICA, INC.
WORKING WEIGHT PULL DOG CERTIFICATION APPLICATION FORM

Owner's Name: _____ AMCA Member: Yes No

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ ZIP: _____

Location of Event: _____ Date: _____

Event Managing Organization/Club: _____

Secretary's Name: _____ Email: _____

Address: _____ City: _____ State: _____ ZIP: _____

Dog's Registered Name: _____ Registration #: _____

To assist in the Working ROM program:

Sire's Registered Name: _____ Registration # (if known): _____

Dam's Registered Name: _____ Registration # (if known): _____

Dog's Weight at Event: _____ Weight Class: _____ Maximum Completed Pull (16 feet in allotted time): _____

Placing: _____ Number of Dogs in Class: _____ (WDX App. Only—please include a complete copy of official results)

Vehicle Used: Sled Wheeled Rig Air Pressure in Pneumatic Tires (if known): _____ Other (specify): _____

Type of Pulling Surface: _____

Temperature: _____ Conditions: _____

Rules Used (check one): AMCA IWPA ISDRA Other: _____ If "Other," have rules been submitted to the Working Dog Committee for approval (if "No," please include a copy of the rules)? Yes No

To be completed by Event Official

I hereby certify that the above named dog was entered in and did complete all events as listed on this form.

Name (please print): _____ Signature: _____

Date: _____ Title: Marshall Judge Timer Other (specify): _____

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ ZIP: _____

ALL NECESSARY FORMS MUST BE SENT WITH THE FOLLOWING APPLICATION FEES:

- AMCA Members: \$8 for first application; \$5 for each additional application sent at the same time
- Non-AMCA Members: \$16 for first application; \$10 for each additional application sent at the same time

Mail WWPDX Applications To:

Sue Fuller
26 Malamute Road
Twisp, WA 98856

Mail/Fax WWPDX Applications To:

Nancy Russell
601 Big Horn Drive
Walsenburg, CO 81089-9494
Fax 719-738-1377