

JUNIOR HANDLING WINNERS CONFORMATION

Instructions

- This report to be typed or printed in ink.
- All signatures to be written in ink.

Distribute copies as follows:

CKC
Junior Handling Representative
Club holding event

Name of Club: _____ Club No: _____

Date of Event: _____ Event No: _____

Junior Novice	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				
Junior Open	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				
Intermediate Novice	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				
Intermediate Open	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				
Senior Novice	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				
Senior Open	Name	Armband No.	Junior Handler No.	Office Use Only Zone
1st				
2nd				
3rd				
4th				

Best Overall _____

The above results are true and correct to the best of my knowledge

_____ Date

_____ Name of Official (Please Print)

 Signature of Official

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