

AAC Championships



Regional Application ~~AK~~

Please send completed application to the national Steering Committee Chair;
Tahnis Manhard m.tahnis2@gmail.com

Application must include the following typed information:

Regional Details:

- Location: _____
- Proposed Date: _____
- Host Club or Group: _____
- Address: _____

- Website Information if available: _____

For the following people (~~AK~~)

Trial Chair Person, Co-Chair, Trial Secretary, Score Person(s) and Ribbon Coordinator.

- Names
- Address and postal code
- Phone number, Cell Number, Fax Number
- Email address

Judges List (see attached form F2 below):

Include

- Names
- Home province
- Email address

Site:

Identify if this is an approved site. If not, advise what, if any, arrangements have been made for approval. **Regional cannot be fully approved until site is approved.**

- Approved site; When was it approved and by whom? _____
- Site is not approved; Attach details on approval arrangements.

Rings:

Ring sizes; NOT less than 9,000 square feet, with no side being less than 70 feet.

Surface; must be firm non-slip surface providing SAFE footing for handlers and dogs.

- Give details on each ring, sizes and surface.

@k °° **Typed Document With Details For The Following:**

YES

- Insurance:
- E-Timing:
- Benching:
- Parking:
- Exercise Area:
- Booth Space:
- Security On Site:
- Washroom Facilities

YES YES

- Camping / Hotel Access:
- TV Coverage / Sponsorship:
- Special Events If Any (Evenings):
- Facility Information:

Applications must also include

- A proposed budget
- A sketch of the site layout.

**Please send completed application to the national Steering Committee Chair;
Tahnis Manhard m.tahnis2@gmail.com**

F1

Regional Personnel

Trial Chair *or* _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

Trial Co-Chair *or* _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

Trial Secretary *or* _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

Ribbon Coordinator *or* _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

Score Person *or* _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

Title: _____

Name:							
Address					City:		
Prov:		PC:		Tel:		Fax:	
Cell:			Email:				

PRINT THIS PAGE AGAIN FOR MORE PEOPLE

F2

Judges List

1. Name: _____

Prov: _____ Email: _____

2. Name: _____

Prov: _____ Email: _____

3. Name: _____

Prov: _____ Email: _____

4. Name: _____

Prov: _____ Email: _____

5. Name: _____

Prov: _____ Email: _____

6. Name: _____

Prov: _____ Email: _____

7. Name: _____

Prov: _____ Email: _____

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