



**American
Kennel Club®**

JUDGING OPERATIONS DEPARTMENT
PO Box 900062
RALEIGH, NC 27675-9062
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FAX (919) 816-4225
judgingops@akc.org
www.akc.org

January 2018

PARENT CLUB REQUEST FOR NON-APPROVED INDIVIDUAL TO JUDGE A SPECIALTY SHOW

PLEASE TYPE OR PRINT IN BLACK OR BLUE INK. Designated areas of applications should be completed before submitting to the Department for consideration. Individuals may not be approved for more than one specialty per year under this special provision. Reminder: even if the Department views request favorably, the approval is not final until individual requested has met all requirements as outlined in the Judging Approval Process. **Please keep copies for your records.** All forms available at: www.akc.org/judges/conformation/index.cfm

Specialty Club: _____ Date of Event: _____

Location of Event: _____

Type of specialty show for which the request is being made: Parent Club Specialty Local Breed Club Specialty

Has an application been submitted for this event? Yes No. Is the event an independent or designated specialty

REQUESTED INDIVIDUAL

_____ Name: _____
Mr./Mrs./Miss/Ms.

Address: _____

City: _____ State: _____ Zip code: _____ Email: _____

Verify Email: _____ Over 21 years of age? Yes No

Home Phone# _____ Work Phone # _____ Fax # _____

Cell Phone# _____ Number of years owning/breeding/exhibiting this breed: _____

LIST BELOW ACCOMPLISHMENTS OF THE INDIVIDUAL BREEDING/OWNING/EXHIBITING IN THIS BREED:

Completed form may be printed and signed or signed electronically. Forms may be submitted by mail, email or fax to the Judging Operatins Department.

FORM MUST BE COMPLETED BY PARENT CLUB PRESIDENT OR PARENT CLUB CORRESPONDING SECRETARY

PRINT NAME

SIGNATURE

DATE