



# FIELD TRIAL CHECKLIST

Name of Club: \_\_\_\_\_

Member Affiliation (i.e. AFTCA, NBHA, USCSDA, ABHA, SBHA, etc.): \_\_\_\_\_

Championship / Classic Name: \_\_\_\_\_

Date(s): \_\_\_\_\_

Location & Directions for Field Trial:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Drawing Information (Date, Time and Location):  
\_\_\_\_\_

Judges (Name, City and State):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Stakes & Entry Fees (With applicable purse and/or prize information):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Logos Needed in Advertisements, Sponsor Information, etc:  
\_\_\_\_\_  
\_\_\_\_\_

Contact Information for Entries (Name, Address, Phone, Email, Club Position):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Billing Information for Ad (Pre-payment is required)  
 Check  Visa  MasterCard  AMEX \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ CVV \_\_\_\_\_  
Name on Card: \_\_\_\_\_ EXP Date: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_