

ASCA®
6091 E. State Hwy 21
Bryan TX 77808
(979) 778-1082 FAX:(979) 778-1898

Course Director: _____
Address: _____
Ph#: _____
ASCA membership #: _____

Host Club: _____
Date AM PM _____
Location: _____
C.D.'s e-mail: _____

Entry#	Reg. #	<i>Judge</i>				<i>Judge</i>				<i>Judge</i>				Handler's Name	Dog's Reg. Name
		Class	Div	Score	Plc	Class	Div	Score	Plc	Class	Div	Score	Plc		
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					
		C				S				D					

Page _____ of _____

PLEASE LIST RESULTS FOR ONE TRIAL ON EACH FORM
LIST ALL SCORES – QUALIFYING AND NON-QUALIFYING

Sanction # _____

I have checked each item for accuracy and believe the above information to be correct.

 (signature of Course Director)

 (date)