

FLAT-COATED RETRIEVER SOCIETY OF AMERICA, INC.

APPLICATION FOR WC OR WCX CERTIFICATE

Working Certificate _____

(check only one)

Working Certificate Excellent _____

PLEASE PRINT OR WRITE CLEARLY

Dog's Registered Name _____ Call name _____

AKC # _____ Date of birth _____ Sex _____

Sire _____

Dam _____

Owner/Co-owners _____

Mailing Address _____

e-mail address _____ Phone (H) _____

Handler _____ Phone (W) _____

TEST INFORMATION

Test Date _____ Host Club _____

Test site (use entry form or catalog for full details) _____

Test Sec'y Name/Address/E-mail address _____

Judges: (Please print name, address, AKC number, and e-mail address)

Name _____ Name _____

Address _____ Address _____

AKC number _____ AKC number _____

E-mail address _____ E-mail address _____

JUDGES' CERTIFICATION

(SIGN ONLY IF DOG PASSES TEST AND YOU HAVE CHECKED APPROPRIATE BOX)

WE CERTIFY THAT THIS FLAT-COATED RETRIEVER HAS COMPLETED THE
_____ < WORKING CERTIFICATE TEST (check one) WORKING CERTIFICATE EXCELLENT TEST > _____
TO OUR SATISFACTION AND IS ENTITLED TO RECEIVE ITS TITLE AND CERTIFICATE FROM
THE FLAT-COATED RETRIEVER SOCIETY OF AMERICA, INC.

Signed _____ Signed _____
Judge Judge

NOTE TO APPLICANT IF NOT A SOCIETY TEST: To receive your FCRSA Certificate and be added to the Certificate List, mail this form with check payable to FCRSA, Inc., (\$5.00 members, \$10.00 non-members), to Leslie Phillips, WC/WCX Administrator, 2800 Wynnetree Ct., Hilliard, OH 43026.