



DOGSNT CONFORMATION EXHIBITION MANAGERS REPORT

CLUB: _____ VENUE: _____
DATE: _____ JUDGE: _____
START: _____ FINISH: _____

EXHIBITION MANAGER: _____

RING STEWARD: _____

ASSEMBLY STEWARD/S: _____

CHART STEWARD/S: _____

CERTIFICATE WRITER/S: _____

OTHER STEWARD/S: _____

ENTRIES: _____ ABSENTS** _____
**includes Scratchings

CHALLENGES WITHHELD:

BREED: _____ SEX: _____

BREED: _____ SEX: _____

BREED: _____ SEX: _____

AWARDS WITHHELD:

AWARD: _____ DETAILS: _____

AWARD: _____ DETAILS: _____

OTHER MATTERS OF NOTE:



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INCIDENTS / COMPLAINTS: (Please attach documentation if necessary)

1. _____
2. _____
3. _____
4. _____

DETAIL HOW INCIDENT WAS DEALT WITH BY CLUB:

1. _____
2. _____
3. _____
4. _____

DO YOU WISH THE DOGSNT TO ASSIST IN ANY WAY?

1. _____
2. _____
3. _____
4. _____

LIST ATTACHED DOCUMENTATION:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SIGNATURE OF EXHIBITION MANAGER: _____

DATE: _____