



Siberian Husky Club of America, Inc.

Authorized SHCA Certification Form

Name of Race: _____

Name of Race-giving Organization: _____

Date Held: _____ ISDRA-Sanctioned: Yes _____ No _____ Purse: _____

Class Run: _____ Number of Heats: _____ Mileage per Heat: _____

Driver's Name: _____

Number of Dogs on Team: _____ Placing: _____ Finishing Time: _____

Individual Heat Times: 1. _____ 2. _____ 3. _____

Finish Time of Top Three Teams: 1. _____ 2. _____ 3. _____

Number of Drivers 1st Heat/Teams Competing First Day of Competition: _____

Number of Finishing Teams (Lombard-Norris): _____

NAMES OF AKC-REGISTERED SIBERIAN HUSKIES ON TEAM FOR WHICH MILEAGE IS TO APPLY, DEGREE APPLIED FOR, AND AKC NUMBER (For Lombard-Norris Award, team must be 100% Registered Siberians)

	<u>NAME</u>	<u>DEGREE</u>	<u>AKC NUMBER</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____

I certify that the information presented above is true and correct to the best of my knowledge.

Owner/Driver
Print Name _____
Address _____

Phone Number _____
E-Mail _____
Date _____

I certify that the information presented above is true and correct to the best of my knowledge, at the time of signing all requested information on this form was complete, and that I officiated at this race in the capacity of Chief Judge, Chief Timer, or Race Marshall.

Race Marshall, Chief Judge, or Chief Timer
Print Name _____
Address _____

Phone Number _____
E-Mail _____
Date _____