



# AUSTRALIAN SHEPHERD CLUB OF AMERICA®

6091 E State Hwy 21  
Bryan, TX 77808  
www.asca.org

P: (979) 778-1082 EXT. 103  
F: (979) 778-1898  
activities@asca.org

HIT \_\_\_\_\_

HC \_\_\_\_\_

HIT JR \_\_\_\_\_

## OBEDIENCE TRIAL REPORT

Please use one form for each Judge per trial. This report must be submitted to the ASCA® Business Office within fifteen (15) days of event. Please list **all** dogs with a qualifying score. **Important:** When completed, make copies of this form for your records, and in case the original is lost in the mail.

HOST CLUB \_\_\_\_\_ LOCATION \_\_\_\_\_ TRIAL DATE \_\_\_\_\_ AM PM

JUDGE \_\_\_\_\_ TRIAL SECRETARY \_\_\_\_\_ EMAIL \_\_\_\_\_ SANCTION #: \_\_\_\_\_

### Coding Key

#### Level:

- A
- B
- C

#### Class:

- UD
- CDX
- ODX
- CD
- BN
- GN
- VER

Entry #	Reg #	Level	Class	Score	Registered Name	Handler – check box if JR	Place
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
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						<input type="checkbox"/>	

I have checked each item for accuracy and believe the above information to be correct.  
Signature of Trial Secretary \_\_\_\_\_ Date \_\_\_\_\_



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## JUNIORS OBEDIENCE TRIAL REPORT

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HOST CLUB \_\_\_\_\_ LOCATION \_\_\_\_\_ TRIAL DATE \_\_\_\_\_  AM  PM

JUDGE \_\_\_\_\_ TRIAL SECRETARY \_\_\_\_\_ EMAIL \_\_\_\_\_ SANCTION #: \_\_\_\_\_

### Coding Key:

Class:

- Novice
- Utility
- Grad Novice
- Open

Arm Band #	Jr. ID #	Date	Class	# Cmp	Place	Dog Registered Name	Score

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

Signature of Trial Secretary \_\_\_\_\_ Date \_\_\_\_\_