



For Official NAHRA Use Only

Club Dues _____ Insurance _____ Date Received _____

Committee _____ problems: _____

Judges _____ problems: _____

**SUBMIT ONE COPY TO NAHRA
KEEP ONE COPY FOR YOUR RECORDS**

PLEASE MAIL COMPLETED FORM TO:

**NAHRA
P.O. BOX 5159
FREDERICKSBURG, VA 22403
Or fax to: 540-899-7691**

*If you have questions, please contact the main office at:
540-899-7620*

APPLICATION FOR A NAHRA HUNTING RETRIEVER FIELD TEST

**Completed application must be submitted at least 8 weeks prior to the field test date or test may not be approved.
If the test is held without approval of NAHRA, points will not be recorded.**

Please enter this application for a (n) Approved Licensed

NAHRA Field Test dates: _____

Name of Club: _____ Club Number: _____

Field Test Secretary: _____

Daytime Phone: _____ Fax: _____ Email: _____

Address: _____
Street/P. O. Box

_____ City State/Province Zip/Postal Code

Complete location of Field Test: _____

Field Test Headquarters (be specific): _____

CLUBS ARE REQUIRED TO CARRY LIABILITY INSURANCE FOR THE FIELD TEST.

Please attach a current copy of your club's Insurance Policy to this application

Insurance Company: _____

Agent: _____

Phone Number: _____ Fax Number: _____

AWARDS
Standard NAHRA Rosettes shall be awarded to all dogs that achieve a qualifying score in each of the categories.

**COPYRIGHT 1998
NORTH AMERICAN HUNTING RETRIEVER ASSOCIATION**
NAHRA reserves the right to refuse approval of an Field Test application based upon the NAHRA General Procedures, Regulations and Field Procedures and Judging Guidelines for NAHRA™ Hunting Retriever Field Tests™.

CATEGORY I**DATE & TIME****BIRDS** STARTED INTERMEDIATE SENIOR**CATEGORY II****DATE & TIME****BIRDS** STARTED INTERMEDIATE SENIOR**❖ JUDGES ❖****THE COMPLETE LIST OF JUDGES MUST BE SET FORTH BELOW:**

The following names are submitted for approval. Neither the Field Test Marshall nor any member of the Field Test Committee shall be approved as a Judge. All judging candidates must have received a Judges Certificate Number (JCN) from NAHRA and be a current NAHRA member with the appropriate judging points in order to be considered eligible.

CATEGORY II**JUDGE'S NAME****JUDGE'S NUMBER****ST IN SR**

JUDGE'S NAME	JUDGE'S NUMBER	ST	IN	SR
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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JUDGES POINTS	EXP. DATE	CURRENT SCHEDULE ST - IN - SR

CATEGORY I**JUDGE'S NAME****JUDGE'S NUMBER****ST IN SR**

JUDGE'S NAME	JUDGE'S NUMBER	ST	IN	SR
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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JUDGES POINTS	EXP. DATE	CURRENT SCHEDULE ST - IN - SR

❖ FIELD TEST COMMITTEE ❖

The Field Test Committee shall be comprised of at least five (5) members of the club. A majority of the Field Test Committee must be present on the Field Test grounds during an approved or licensed NAHRA Hunting Retriever Field Test. Each member of the Field Test Committee must be at least 18 years of age or older, be a current member in good standing of the North American Hunting Retriever Association, Inc. and cannot be a judge at this event. The Field Test Committee cannot contain more than two (2) members of an immediate family or individuals residing in the same household.

RESPONSIBILITY	NAME	DAYTIME PHONE	MEMBER #
Chairperson		()	
Field Test Secretary		()	
Head Field Marshall		()	
Gun Captain		()	
Bird Steward		()	
Other or Alternate		()	

❖ OFFICERS OF THE CLUB ❖

OFFICE	NAME	COMPLETE MAILING ADDRESS	DAYTIME PHONE
President			()
Vice President			()
Secretary			()
Treasurer			()

DECLARATION

I hereby certify that the information provided on this application for a NAHRA Hunting Retriever Field Test is true to the best of my ability. If any of the information changes before the date of the Field Test, the Field Test Secretary will contact the NAHRA office at 540-899-7620. After approval of the Field Test Application, a premium **must** be mailed to the NAHRA office to validate the application. Please send the premium to: NAHRA, P.O. Box 5159, Fredericksburg, VA 22403.

Signature of Club Officer: _____ **Club Position:** _____