

Four Counties Beagle Club

Judging Questionnaire as at October 2019

Please return this form to: fourcountiesbeagleclub@gmail.com

one:	Email:			
Year started with Beagl	es:			
As an Owner:	As an Exhibitor:			
As a Breeder:	As a Judge:			
Please list 3 dogs, which	n you own or have bred that are liste	ed in the Kennel Club Stud Book		
Name of Dog		Stud Book Number		
Please indicate if your n	ame appears on any other breed clu	b lists:		
Name of Society		List (eg A2, B etc)		

Have you attended and passed the following:

KC Regulations & Judging Procedures	Passed: Yes / No	Date:
KC Confirmation & Movement	Passed: Yes / No	Date:
KC Hands on Assessment	Passed: Yes / No	Date:
Beagle Specific Seminar & Assessment	Passed: Yes / No	Date:

Judging Experience

Please list below details of shows at which you have judged beagles. (N.B. Appointments that have not been completed should not be listed)

Society name	Date	Show type	No. of classes	No. entered	No. present
		Totals:			

^{**} Please include any certificates from the above **

Breed	Year first awarded		Most recent appointment		
Completed Stewarding Appointment Please list below details of shows at whe should not be listed)		re stewarded.	(N.B. Appointme	nts that have r	not been completed
Society name	ı	Date	Show type	No. of classes	Judge name
I hereby declare that the informati If any of this information changes,				Beagle Club i	mmediately.
Signed:			Da	te:	