Contact Details:

Phone: (08) 8984 3570 Email: Info@dogsnt.com.au Web: www.dogsnt.com



Correspondence to:

PO Box 37521 Winnellie, NT 0821

North Australian Canine Association Inc - A Member Body of the Australian National Kennel Council

SHOW MANAGERS REPORT

(NOTE: Stewards information only required if not included on the marked catalogue).

AFFILIATE:	VENUE:

→ SHOW 1

JUDGE:	SHOW MANAGER:	DATE:
RING STEWARDS:	G1:	G2:
G3:	G4:	G5:
G6:	G7:	GS:

START TIME: FINISH TIME:

→ SHOW 2

JUDGE:	SHOW MANAGER:	DATE:
RING STEWARDS:	G1:	G2:
G3:	G4:	G5:
G6:	G7:	GS:

START TIME: FINISH TIME:

→ SHOW 3

JUDGE:	SHOW MANAGER:	DATE:
RING STEWARDS:	G1:	G2:
G3:	G4:	G5:
G6:	G7:	GS

START TIME: FINISH TIME:

→ SHOW 4

JUDGE:	SHOW MANAGER:	DATE:
RING STEWARDS:	G1:	G2:
G3:	G4:	G5:
G6:	G7:	GS:

START TIME: FINISH TIME:

This form is to be submitted to info@dogsnt.com.au within 10 working days of the exhibition date.

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SHOW MANAGERS REPORT - CONTINUED

(Required only if applicable)

CLUB:	VENUE:			DATE:	
JUDGE:		EXHIBITION MANAGER:			
→ CHALLENGES WITHHELD:					
 EXHIBIT #: EXHIBIT #: 		2. EXHIBIT #:4. EXHIBIT #:			
→ AWARDS WITHHELD:					
 EXHIBIT # & AWARD: EXHIBIT # & AWARD: 		2. EXHIBIT # & AWARD:4. EXHIBIT # & AWARD:			
→ INCIDENTS/COMPLAINTS: (Please att	ach documentati	on if necessary))		
1					
2					
→ DETAIL HOW THE INCIDENT WAS DEA	ALT WITH BY THE	CLUB:			
1					
2					
ightarrow do you wish the dogsnt to assis	ST IN ANY WAY?				
1					
2					
→ LIST ATTACHED DOCUMENTATION:					
1					
2					
3					
4					
5					
CIONATURE EVALUATION MANAGER.				DATE.	

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