



AMERICAN
KENNEL CLUB®

Date(s) on which judged _____ Date: _____

WATER TEST REPORT

Event #: _____

No. of Starters _____

No. of Entries _____

THE FOLLOWING DOGS PASSED:

Name of Dog _____	Check One: <input type="checkbox"/> Amateur <input type="checkbox"/> Professional
AKC® No. _____	Sire _____ Dam _____
Owner's Name _____	Owner's Address _____
Handler's Name _____	
<hr/>	
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Owner's Name _____	Owner's Address _____
Handler's Name _____	
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AKC® No. _____	Sire _____ Dam _____
Owner's Name _____	Owner's Address _____
Handler's Name _____	

JUDGE'S CERTIFICATION

I certify that _____ dogs passed the Water Test and that all above information identifying the dogs that passed was entered prior to my signing this page.

Judge's Signature

Judge's Signature

PLEASE PRINT JUDGE'S NAME

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FIELD TRIAL SECRETARY'S CERTIFICATION

I certify that the judges have verified the above information and signed this page.

DATE

Signature of Field Trial Secretary



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