

# ABMC REGISTER OF MERIT APPLICATION

REGISTERED NAME:

\_\_\_\_\_ AKC/ILP# \_\_\_\_\_

OFA/GDC# & RATING \_\_\_\_\_ TATTOO/CHIP # \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

SIRE \_\_\_\_\_

DAM \_\_\_\_\_

OWNER(S) \_\_\_\_\_ PHONE# \_\_\_\_\_

ADDRESS \_\_\_\_\_

APPLYING FOR \_\_\_\_\_ CLASS

UPGRADE TO \_\_\_\_\_ CLASS OR UPDATE \_\_\_\_\_ CLASS

ENCLOSED 2, FULL BODY PROFILE, COLOR PHOTOS OF MALINOIS \_\_\_\_\_

ENCLOSED PHOTOCOPY OF AKC REGISTRATION \_\_\_\_\_ & OFA/GDC CERTIFICATE \_\_\_\_\_

ENCLOSED PHOTOCOPIES OF CERTIFICATES AND/OR SCORE BOOKS (IF NO CERT'S ISSUED) FOR THE FOLLOWING INDICATED TITLES FOR APPLICABLE CLASS:

AKC CH \_\_\_\_\_ CD \_\_\_\_\_ CDX \_\_\_\_\_ UD \_\_\_\_\_ TD \_\_\_\_\_ TDX \_\_\_\_\_ VST \_\_\_\_\_ HS \_\_\_\_\_

HI \_\_\_\_\_ HX \_\_\_\_\_ NA \_\_\_\_\_ OA \_\_\_\_\_ AX \_\_\_\_\_ NAJ \_\_\_\_\_ OAJ \_\_\_\_\_ AXJ \_\_\_\_\_

SchH 1 \_\_\_\_\_ SchH 2 \_\_\_\_\_ SchH 3 \_\_\_\_\_ FH \_\_\_\_\_ BH \_\_\_\_\_ WH \_\_\_\_\_

Ring 1 \_\_\_\_\_ Ring 2 \_\_\_\_\_ Ring 3 \_\_\_\_\_ Brevet \_\_\_\_\_ SAR \_\_\_\_\_ PD \_\_\_\_\_

OTHER NOTEWORTHY TITLES: \_\_\_\_\_

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DATE SUBMITTED \_\_\_\_\_ PUBLISHED IN PERFORMER \_\_\_\_\_

DATE OF FIRST CLASS \_\_\_\_\_ ROM# CLI- \_\_\_\_\_

DATE OF SECOND CLASS \_\_\_\_\_ ROM# CLII- \_\_\_\_\_

DATE OF THIRD CLASS \_\_\_\_\_ ROM# CLIII- \_\_\_\_\_

Send this form and all substantiating material to: Tina Fields, ROM Custodian  
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