



**AMERICAN  
KENNEL CLUB®**

**PERFORMANCE EVENTS DEPARTMENT**

PO Box 900051, Raleigh, NC 27675-9051

Tel: 919-816-3908 / Fax: 919-816-4211

Send to: [performanceevents@akc.org](mailto:performanceevents@akc.org)

**POINTING BREED HUNT TEST - SPECIAL EVENT APPLICATION**

This application is only to be used by clubs seeking to host an event that is of special significance. Examples would include a state championship, an anniversary or commemorative event or a youth only event. Clubs applying for this type of special event may be allowed to offer a unique mix of classes or eligibility requirements.

Club Name: \_\_\_\_\_

Club Number: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

City/State/Zip of test: \_\_\_\_\_

Name of Grounds: \_\_\_\_\_

Name of Special Event (if one was created):

\_\_\_\_\_

Tell us about the special significance of this event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe if there will be any unique eligibility requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide overview of the format of this hunt test and any unique classes.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the club intend on holding this annually?      Yes                  No

Specify Numerical or Daylight Limit if applicable: \_\_\_\_\_

Entries will close what time and date: \_\_\_\_\_

Drawing will be held where: \_\_\_\_\_

Time and date of Drawing: \_\_\_\_\_

Will a water test be held?      Yes                  No

**Event Secretary:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Tel 1: \_\_\_\_\_ Tel 2: \_\_\_\_\_ Email: \_\_\_\_\_

**Event Chairperson:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Tel 1: \_\_\_\_\_ Tel 2: \_\_\_\_\_ Email: \_\_\_\_\_

TEST LEVEL:	DATE:	TIME:	ENTRY FEE:

JUDGE #:	TEST LEVEL:	EMAIL:	STATE:

**Names of Event Committee Members: (A minimum of 5 members required)**

1. \_\_\_\_\_ 4. \_\_\_\_\_  
 2. \_\_\_\_\_ 5. \_\_\_\_\_  
 3. \_\_\_\_\_ 6. \_\_\_\_\_

Please provide contact info for the club President, Vice President, Secretary, Treasurer.

NAME	POSITION	COMPLETE ADDRESS	TEL#	EMAIL
	President			
	Vice President			
	Secretary			
	Treasurer			

**Please review the following application instructions:**

1. Applications must be sent a minimum of 3 months in advance in order to be reviewed properly and allow for enough lead time. The license fee is \$25. Applications received within less than 3 months of the event date maybe incur a \$25 late fee. (No fee is required of a Member Club for the first event within a year, but a \$15 fee must accompany an application for an additional event to be held within that calendar year.)
2. As stated in the regulations, the premium list for this event cannot be printed until the club has received their approval email from the Performance Events Department.
3. When approved, the information given on this form must be printed in the premium list along with any other information required under the respective regulations. **As the host club, you are required to submit a copy of the premium lists to the AKC Performance Events Department at the time of distribution.** For your convenience a copy can be emailed to: [performanceevents@akc.org](mailto:performanceevents@akc.org) Failure to do so may result in a fine and/or failure to receive approval for future events.
4. This event is held under the Regulations for AKC Hunting Tests for Pointing Breeds. The information on this form, when approved by the AKC shall be final and no changes may be made without AKC authorization.

The club certifies that a completed Disaster & Emergency Plan will be available at the event. By checking this box, a completed plan no longer needs to be submitted with application.

Signature of Club Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Club Officer and Title: \_\_\_\_\_