



AKC Junior Ambassador Participation Form

First Name:			Last Name:			
Mailing Address:						
City:				Zip Code:		
Club Affiliation (if applicable):			or Number:	Date of Birth:		
		L				
Activity 1						
Category (circle one):	Community Ass	Assist at Events Participate in Events Club/Other				
Describe Activity:						
What do you feel like you learned from the activity?						
Activity 2						
Category (circle one):	Community Ass	ist at Even	ts Participate in Event	s Club/Other		
Describe Activity:						
What do you feel like you learned from the activity?						
Activity 3						
Category (circle one):	Community Ass	ist at Even	s Participate in Event	s Club/Other		
Describe Activity:						
What do you feel like you learned from the activity?						





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Activity 4								
Category (circle one):	Community	Assist at Events	Participate in Events	Club/Other				
Describe Activity:								
What do you feel like you learned from the activity?								
Activity 5								
Category (circle one):	Community	Assist at Events	Participate in Events	Club/Other				
	Community	Assist at Events	Faiticipate in Events	Ciuo/Ouici				
Describe Activity:								
What do you feel like you learned from the activity?								
Activity 6								
Category (circle one):	Community	Assist at Events	Participate in Events	Club/Other				
Describe Activity:								
What do you feel like you learned from the activity?								
Name of Adult:				Date:				
Role of Adult:								
Signature of Adult:								

Return Application to:

AKC/Juniors PO Box 900059 Raleigh, NC 27675 Email: juniors@akc.org Fax: 919-816-3770