



AMERICAN KENNEL CLUB™

Visit Us!

www.akc.org/akctemptest

AMERICAN KENNEL CLUB
Attn: AKC Temperament Test Dept.
8051 Arco Corporate Drive / Ste 100
Raleigh, NC 27617-3390
Fax: 919-816-4203



INQUIRIES:

Tel: 919-816-3757 (M-F 8:15AM to 4:30PM)

Email: akctemptest@akc.org

AKC TEMPERAMENT TEST (ATT) EVENT APPLICATION

Event # \_\_\_\_\_ Club Name \_\_\_\_\_
Date Start \_\_\_\_\_ Site (Name) \_\_\_\_\_
Date End \_\_\_\_\_
\*Address \_\_\_\_\_
\*City, State \_\_\_\_\_
\*Zip Code \_\_\_\_\_
\*A COMPLETE ADDRESS FOR YOUR EVENT SITE MUST BE PROVIDED.

Driving Directions: \_\_\_\_\_

This event is being held in conjunction with a show, cluster, national, etc ? [ ] YES [ ] NO

[ ] By checking this box, the host of this test certifies they are holding this event in compliance with the Non-AKC Events Policy as approved by the Board of Directors as posted online at: https://www.akc.org/sports/coursing/coursing-ability-test/regulations/. This policy stipulates AKC events may not be held in conjunction with events sanctioned by an organization not affiliated with the AKC without the approval of the Performance Events Department.

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

INSTRUCTIONS:

- A separate application and fee is required per each AKC Temperament Test (ATT)
The following information must be submitted together in order to have your test approved:
Completed Application including the assigned ATT Evaluator
Application Fee (\$35 per event)
Applications MUST be received at least 30 days prior to the event.
Incomplete applications and/or applications received without the required fee(s) cannot be accepted or approved.
ONCE AN APPLICATION HAS BEEN APPROVED, NO REFUNDS WILL BE ISSUED FOR THE APPLICATION FEES OR FINES
ATT Test Secretaries or Chairpersons are not eligible to also be ATT evaluators during the same event.
ATT Evaluators cannot evaluate their own dog.
Notification of event approvals will be sent separately to the Event Secretary.
Premium lists must be sent to AKC at the time it is available to prospective entrants.

*This event is held under the Rules and Procedures of the American Kennel Club. The information on this application, once approved by the AKC, shall be final. No changes may be made without AKC authorization. By submitting an application for and receiving approval to hold an event under the rules of the American Kennel Club, the organization grants American Kennel Club, its employees, agents, licenses and others working for it or on its behalf the unlimited, irrevocable access, right and authority to photograph, record, film and/or videotape at the event. The organization agrees that it has not and will not enter into any arrangement or agreement with any other party that will prohibit or prevent the American Kennel Club from exercising this right.*

**ENTRY INFO:**

What is the entry fee: \$ \_\_\_\_\_

Will entries be taken day of or advanced? \_\_\_\_\_

If advanced, provide the date and time entries will close: \_\_\_\_\_

If entries are to be taken day of, what time will the club begin taking entries? \_\_\_\_\_

Will this test have an entry limit?  YES  NO If YES, provide the maximum number of entries: \_\_\_\_\_

AKC Temperament Tests are open to dogs at least 1 year of age who are registered via an AKC registration, FSS registration, Purebred Alternative Listing or Canine Partner Listing.
---

**5 COMMITTEE MEMBERS Required:**

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

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

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

**ASSIGNED ATT EVALUATOR:** *(Provide an alternate ATT Evaluator, if the primary ATT Evaluator is planning to have their own dog tested during this event.)*

Name: \_\_\_\_\_ Evaluator #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Alternate: \_\_\_\_\_ Evaluator #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**CLUB OFFICERS**

<b>President</b>	_____	_____
	Name	Phone Number
_____	_____	_____
Complete Street Address	Email Address	

**Vice**

**President**

Name

Phone Number

Complete Street Address

Email Address

**Club**

**Secretary**

Name

Phone Number

Complete Street Address

Email Address

**Treasurer**

Name

Phone Number

Complete Street Address

Email Address

**Test**

**Secretary**

Name

Phone Number

Complete Street Address

Email Address

**Test**

**Chairman**

Name

Phone Number

Complete Street Address

Email Address

Signature and Title of Club Officer

Date

Printed Name and Title of Club Officer

Date