

ESSENTIAL

DATA FORM



Trial Name: _____ Hosted By (club): _____

Trial Location: _____ State: _____ Zip: _____

Trial was ran in accordance with the minimum requirements as defined by SBHA: Yes ☐ No ☐

Trial Type: Club / Weekend ☐ State Classic ☐ Regional CH ☐ National CH ☐

Title of Stake: _____ Length of Stake: _____

Trial Chairman: _____ Date: _____

Address: _____ Phone: _____

Judge: _____ Signature: _____
Printed Name / Address

Judge: _____ Signature: _____
Printed Name / Address

Dogs Drawn: ☐ Pointers: ☐ Setters: ☐ GSP: ☐ Others: ☐

1st PLACE

Registered Name: _____ FDSB No.: _____

Breed: _____ Whelped: _____ Sex: _____ Color: _____

Sire: _____ Dam: _____

Owner: _____ Address: _____ Phone: _____

Handler: _____ Address: _____ Phone: _____

2nd PLACE

Registered Name: _____ FDSB No.: _____

Breed: _____ Whelped: _____ Sex: _____ Color: _____

Sire: _____ Dam: _____

Owner: _____ Address: _____ Phone: _____

Handler: _____ Address: _____ Phone: _____

3rd PLACE

Registered Name: _____ FDSB No.: _____

Breed: _____ Whelped: _____ Sex: _____ Color: _____

Sire: _____ Dam: _____

Owner: _____ Address: _____ Phone: _____

Handler: _____ Address: _____ Phone: _____

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