



Golden Retriever Club of America

Breed Education Committee

Application

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Telephone: _____ Evening Telephone: _____

E-mail Address: _____

Occupation: _____

GENERAL INFORMATION

GRCA Region: Central Eastern Western

Date of GRCA membership _____. Total number of years _____.

During that time have there been any lapses of a year or more in your membership? Yes No

How many GRCA Regional Specialties have you attended? _____/_____ Indicate the last year.

How many GRCA National Specialties have you attended? _____/_____ Indicate the last year.

How many canine-related educational seminars have you attended? _____/_____ Indicate the last year.

Do you hunt with your Golden Retrievers? Yes No Upland game Waterfowl

Year you acquired your first Golden Retriever _____.

Year you first competed in AKC or GRCA events with a Golden Retriever _____.

BREED EXPERIENCE (All questions pertain to activities with *Golden Retrievers only*)

BREEDING

Number of litters bred: 0 – 4 5 – 9 10 or more.

Year of last litter whelped: _____. In what year did you breed your first litter: _____.

Have you offered any of your dogs at public stud within the past 10 years? Yes No

CONFORMATION

Most recent year of participation: _____. Year began participation: _____.

Please provide the registered name and AKC # of no more than six AKC Champions that you have owned or bred. If you personally handled the dog for all of that time, please indicate that by checking the appropriate box. Indicate whether you were the owner, breeder, or both for each dog titled. If you have not titled a dog, indicate any dogs you have owned that have won major points.

| Registered Name/AKC # | Personally Handled | Bred, Owned Entirely Handled | Owner | Breeder |
|-----------------------|--------------------------|---------------------------------|--------------------------|--------------------------|
| 1. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

FIELD EVENTS

Most recent year of participation: _____. Year began participation: _____.

Please provide the registered name and AKC # of no more than six WC, WCX, AKC hunting retriever titles, or licensed trial placements on dogs that you have owned or bred. If you personally handled the dog for all or a portion of the time, or if you were the primary trainer for the dog – please indicate that by checking the appropriate box. Indicate whether you were the owner, breeder, or both for each dog titled.

| Registered Name/AKC # | Personally Handled | Primary Trainer | Owner | Breeder |
|-----------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PERFORMANCE EVENTS

Most recent year of participation: _____. Year began participation: _____.

Please provide the registered name and AKC # of no more than six AKC agility, obedience, and/or tracking dogs that you have owned or bred. If you personally handled the dog for all or a portion of the time, or if you were the primary trainer for the dog – please indicate that by checking the appropriate box. Indicate whether you were the owner, breeder, or both for each dog titled.

| Registered Name/AKC # | Personally Handled | Primary Trainer | Owner | Breeder |
|-----------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

JUDGING EXPERIENCE

| Category | Year First Approved | Year of Most Recent Assignment | # Assignments in Past Five Years |
|---------------------------------|---------------------|--------------------------------|----------------------------------|
| Sweepstakes | _____ | _____ | _____ |
| AKC Applicant/Provisional | _____ | _____ | _____ |
| Specialty Show | _____ | _____ | _____ |
| All-breed conformation | _____ | _____ | _____ |
| Field Trial Stakes | _____ | _____ | _____ |
| Hunt Tests | _____ | _____ | _____ |
| WC/WCX Tests | _____ | _____ | _____ |
| Agility Trials | _____ | _____ | _____ |
| Obedience Trials | _____ | _____ | _____ |
| Tracking Tests | _____ | _____ | _____ |

AREAS OF INTEREST

Which positions on the Breed Education Committee are you most interested in? Please indicate first and second choices.

Overall Breed Education Committee Chairperson

Member Education Subcommittee

- Chairperson
- Field representative
- Regional representative

Field Education Subcommittee

- Chairperson
- Conformation representative
- Regional representative

Breeders' Education Subcommittee

- Chairperson
- Field representative
- Regional representative

Judges' Education Subcommittee

- Chairperson
- Field representative
- Regional representative

Technical Support Group

- Chairperson
 - Other (indicate skills and areas of interest) _____
-

Presenter

Tutor

SUPPLEMENTAL QUESTIONS

Please answer the following questions on a separate sheet of paper and attach it to this application. Each answer should be concise and to the point. Answers to each question should not exceed one page double-spaced.

1. Why are you interested in an appointment to the Breed Education Committee or as a Presenter or Tutor?
2. What special skills, abilities, experience and knowledge can you contribute?
3. Indicate your experience working on committees, advisory boards and in other small group settings.
4. Technology Support Group applicants, indicate in a clear and understandable manner your particular technical skills including familiarity with software programs and presentation formats.
5. Presenter and Tutor applicants, indicate your experience speaking before groups and giving presentations.

Date

Signature