Chinook Owners Association Working Dog Program

Page of Packing - Advanced Form

Date:	Registration Number:		Registration	Registration Type: UKC UKC LP COA CrossBreeding Program			
Owner & Co-Owner:	Dog's Reg	Dog's Registered Name:					
Owner email:		Owner Phone #	Owner Phone #:		Dog's Date of Birth:		
Owner Street Address: Number, Street, Town, State, Zip Code							
Location / Trail Name	Handler	Handler email	Handler Phone #	Pack Weight	Distance (Miles) and /or Elevation (Feet)	Comments Note if Trip narratives/journal are included in application	

I confirm the above information is accurate.

Signature of Owner

I confirm the above information is accurate.

Signature of Handler