

AMERICAN FIELD

FIELD TRIAL CHECKLIST

Club Name _____

Member Affiliation (i.e. AFTCA, NBHA, USCSDA, ABHA, etc.) _____

Championship / Classic Name _____

Date(s) _____

Location & Directions for Field Trial

• Drawing Information (Date, Time and Location)

• Judges (Name, City and State)

• Stakes & Entry Fees (With applicable purse and/or prize information)

• Logos needed in advertisements, Sponsor information, etc.

• Contact information for entries (Name, Address, Phone, Email, Club Position)

• Please include my print ad on The American Field website (Additional fee applies): Yes No

• Billing information for ad (Pre-payment is required)

Check Visa MasterCard AMEX _____ - _____ - _____ - _____

Name on Card _____ Expiration Date ____ / ____

Billing Address _____

Daytime Phone _____ Email: _____