

Miniature Australian Shepherd Club of America, Inc

Show Report



This form must be forwarded to the MASCA Business office. Copy of completed entry forms from the dogs listed below must accompany this form. This information is needed to confirm wins and titles with the Miniature Australian Shepherd Breed Club. Information can be sent to the MASCA Show Secretary: mascashowsecretary@mascaonline.com

Club: _____ Show Date: ____/____/____

Show # _____

Show Location (City, State): _____

Show Secretary: _____ e-mail: _____

Phone: (____) ____-____ Cell: (____) ____-____ Fax: (____) ____-____

Judge (regular conformation): _____ Judge #: _____

Total Number Of Dogs Competing: _____

Special Dogs: _____ Special Bitches: _____ Class Dogs: _____ Class Bitches: _____

Best Of Breed: _____ () Male () Female

Armband# _____ Owner(s): _____

Best Opposit Sex: _____ () Male () Female

Armband# _____ Owner(s): _____

Best Of Winners: _____ WD: _____ WB: _____

Winner's Dog: _____ () Male () Female

Armband# _____ Owner(s): _____

Winner's Bitch: _____ () Male () Female

Armband# _____ Owner(s): _____

The information in this report is true and complete to the best of my knowledge and belief.

Show Co-ordinator: _____ Phone: (____) ____-____

Signature: _____ Date: ____/____/____