

UKC® OFFICIAL HUNT REPORT

	"	Club Name				Club Id			Date / /	
These sections must be completed by the Official Name: MOH #: Phone: Check box if HD format used [] Signature: I certify the information provided is true and correct.			EVENT TYPE: REGULAR DOUBLE HEADER SLAM QUALIFYING EVENT YOUTH		Beagle Coonhound Cur/Feist Squirrel Coon # of Conditional Entries:			□ Hunt #2		
Place	Dog	Name (do not include titles)	UKC #	Breed	Owner (or l	Handler Name & Age if youth	hunt)	Total Score	Category (check one)	
1st									\Box REG \Box CH \Box GR	
2nd									\Box REG \Box CH \Box GR	
3rd									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW									\Box REG \Box CH \Box GR	
CW	CW							\Box REG \Box CH \Box GR		
Scratched for fighting Dog Name:						UKC #:	0\	Owner:		
Scratched for fighting Dog Name:						UKC #:	0\	Owner:		
Scrato	ched for fighting	Dog Name:				UKC #:	0	Owner:		

Mail or Email UKC copies to: