## Midland Lhasa Apso Association

Surname	Forename			Title	Affix	
Address						
Post Code						
Telephone No		Ema	il Address	<b>S</b>		
Do You Own/breed Lha	sa Apsos?		Yes/No	How Lon	g	Years
Do you own/breed other					Yes/No	0
Have you awarded Cha	llenge Certific	ates i	n other b	reeds: Yes	s/No	
Give names of dogs, broowned/bred by you whe						h were
Have you attended a K(						Yes/N
(a) K.C. Regulations and (b) K.C. Requirements of Have you passed the	of a Dog Shov	v Jud	ge			Yes/N o Yes/N
(c) K.C.Anatomy, Confo	rmation & Mo	veme	nt			Yes/N o
(d) K.C. Hands On Asse	essment run b	y a K	C accredi	ted traine	r.	Yes No
(e)K.C. Guidelines for th	he ring Stewai	rd				Yes/N o
(f) K.C. recommended Lhasa Apso Specific assessment/seminar organised by a Breed Clubin accordance with the code of best practice			Yes/N o			

(a) An accompany was but the Library Anna Dread Course!	Yes/N
(g) An assessment run by the Lhasa Apso Breed Council	0
Did you pass the relevant exam	Yes/N
(h) Have you attended any other type of Seminar	Yes/N o
How many times have you stewarded? Please give shows & dates	5.
Have you judged a Lhasa Apso Breed Club Show:	Yes/No
Do you wish to be listed as a	

Do you wish to be listed as a

Breed Specialist or Non Breed Specialists (delete which is not applicable)

## **NUMBER OF LHASA APSO'S JUDGED**

The show	Date judged	Number of dogs entered	Number dogs absent	Total number of dogs judged

Please li	ist anv othe	er relevant informati	ion:	

Please send the completed form to:	
Mrs J Scarll The Turbary Belton Nr Doncaster DN9 1PL Tel: 01427 875982	
Email: joanandjohn123@btinternet.com	