

## **Alaskan Malamute Club of America, Inc.**

## WORKING WEIGHT PULL DOG CERTIFICATION APPLICATION FORM

Working Dog Committee Michelle Podolak and Chari Erickson, Co-Chairs

April 2025

Owner's Name:	Owner Information:			
Phone:	Owner's Name:		AMCA Memb	oer: [ ] Yes [ ] No
Dog Information: [ ] I wish to pay with PayPal. PayPal Email:	Address:	City:	State:	ZIP:
Registration #:_   Dam	Phone:	Email:		
To assist in the Working ROM program:  Country of Registration: Dog Sirc Dam Registration # (if known):  Need the Working ROM program:  Country of Registration: Dog Sirc Dam Registration # (if known):  Registration # (if known):  Event Managing Organization/Club;  Secretary's Name:  Email:  Address:  City:  State:  City:  State:  Conditions:  Rules Used (check one):  [] AMCA [] IWPA [] ISDRA [] Other:  If "Other," have been submitted to the Working Dog Committee for approval? [] Yes [] No If "No," please include a copy of the rules.  Dog's Weight at Event:  Weight Class:  Completed Pull Weight (16 fect in allotted time)  Placing # of Dogs in Class (A/X Apps- please include complete copy of afficial results. S Apps include both results & tracking  To be Completed by Event Official:  I hereby certify that the above named dog was entered in and did complete all events as listed on this form.  Name (please print):  Signature:  Date:  Title: [] Marshall [] Judge [] Timer [] Other (specify):  Phone:  Email:  Address:  City:  State:  ZIP:  Application Instructions:  ALL NECESSARY FORMS MUST BE SENT WITH THE FOLLOWING APPLICATION FEES:  AMCA Members: \$8 for first application; \$5 for each additional application sent at the same time  Non-AMCA Members: \$16 for first application; \$10 for each additional application sent at the same time	Dog Information:	] I wish to pay with PayPal. PayPal Email:		
Sire's Registered Name: Registration # (if known):  Dam's Registered Name: Registration # (if known):  Event Information:  Location of Event: Date:  Event Managing Organization/Club:  Secretary's Name: Email: Address: City: State: ZIP:  Pull Information:  Vehicle Used: Steel Wheeled Cart Air Pressure in Pneumatic Tires (if known): Other(specify):  Type of Pulling Surface: Information:  Rules Used (check one): AMCA I JWPA I JISDRA OTHER Pressure in Pneumatic Tires Information:  Dog's Weight at Event: Weight Class: Completed Pull Weight (16 feet in allotted time)  Placing # of Dogs in Class (A/X Apps- please include complete copy of official results. S Apps include both results & tracking  To be Completed by Event Official:  Thereby certify that the above named dog was entered in and did complete all events as listed on this form.  Name (please print): Signature:  Date: Title: Marshall Judge Timer Other (specify): Phone: Email:  Address: City: State: ZIP:  Application Instructions:  ALL NECESSARY FORMS MUST BE SENT WITH THE FOLLOWING APPLICATION FEES:  AMCA Members: \$8 for first application; \$5 for each additional application sent at the same time  Non-AMCA Members: \$16 for first application; \$5 for each additional application sent at the same time	Dog's Registered Name:		Registra	ntion #:
Dam's Registered Name:	To assist in the Working ROM progr	m: Country of Registration: Dog	Sire	Dam
Event Information:  Location of Event:	Sire's Registered Name:		Registration # (if	known):
Event Managing Organization/Club:   Secretary's Name:	Dam's Registered Name:		Registration # (if )	known):
Event Managing Organization/Club:  Secretary's Name:  Email:  Address:  City:  State:  ZIP:  Pull Information:  Vehicle Used: [ ] Sled [ ] Wheeled Cart Air Pressure in Pneumatic Tires (if known):  Type of Pulling Surface:  Temperature:  Conditions:  Rules Used (check one): [ ] AMCA [ ] IWPA [ ] ISDRA [ ] Other:  Bused (check one): [ ] AMCA [ ] IWPA [ ] ISDRA [ ] Other:  Dog's Weight at Event:  Weight Class:  Completed Pull Weight (16 feet in allotted time)  Placing  # of Dogs in Class  [ A/X Apps- please include complete copy of official results. S Apps include both results & tracking  To be Completed by Event Official:  I hereby certify that the above named dog was entered in and did complete all events as listed on this form.  Name (please print):  Signature:  Date:  Title: [ ] Marshall [ ] Judge [ ] Timer [ ] Other (specify):  Phone:  Email:  Address:  City:  State:  ZIP:  Application Instructions:  ALL NECESSARY FORMS MUST BE SENT WITH THE FOLLOWING APPLICATION FEES:  • AMCA Members: \$8 for first application; \$5 for each additional application sent at the same time  • Non-AMCA Members: \$16 for first application; \$5 for each additional application sent at the same time	Event Information:			
Secretary's Name:	Location of Event:		Date:	
Address:	Event Managing Organization/	Club:		
Pull Information:  Vehicle Used: [ ] Sled [ ] Wheeled Cart Air Pressure in Pneumatic Tires (if known):Other(specify):	Secretary's Name:	Email:		
Vehicle Used: [ ] Sled [ ] Wheeled Cart Air Pressure in Pneumatic Tires (if known):Other(specify): Type of Pulling Surface:	Address:	City:	State:	ZIP:
Type of Pulling Surface:  Temperature:  Conditions:  Rules Used (check one): [ ]AMCA [ ]IWPA [ ]ISDRA [ ]Other:  Dog's Weight at Event:  Weight Class:  Completed Pull Weight (16 feet in allotted time)  Placing  # of Dogs in Class  (A/X Apps- please include complete copy of official results. S Apps include both results & tracking  To be Completed by Event Official:  I hereby certify that the above named dog was entered in and did complete all events as listed on this form.  Name (please print):  Signature:  Date:  Title: [ ] Marshall [ ] Judge [ ] Timer [ ] Other (specify):  Phone:  Email:  Address:  City:  State:  ZIP:  Application Instructions:  ALL NECESSARY FORMS MUST BE SENT WITH THE FOLLOWING APPLICATION FEES:  AMCA Members: \$8 for first application; \$5 for each additional application sent at the same time  Non-AMCA Members: \$16 for first application; \$10 for each additional application sent at the same time	Pull Information:			
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Temperature:Conditions:	Type of Pulling Surface:	·		
Rules Used (check one): [ ]AMCA [ ]IWPA [ ]ISDRA [ ]Other:				
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Name (please print):Signature:Signature:				
Date:Title: [ ] Marshall [ ] Judge [ ] Timer [ ] Other (specify):				
Phone:Email:	Name (please print):	Signature:		
Address:				
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• Non-AMCA Members: \$16 for first application; \$10 for each additional application sent at the same time				
	• AMCA Members: \$8	for first application; $$5$ for each additional application	sent at the same tim	.e
I am applying for: [ ] WWPD WWPDI [ WWPDA [ WWPDX WWPDS		11		
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Mail/Email WWPD Applications To: Mail/Email WWPDI/WWPDA/WWPDX/WWPDS Applications To:	* *		VPDX/WWPDS Ap	plications To:
Sue Fuller Helen Brott				
26 Malamute Road 4399 Lawrence Dr				
Twisp, WA 98856 Granite Bay, CA 95746 <a href="mailto:mtnhomemals@gmail.com">mtnhomemals@gmail.com</a> hibalmal@reagan.com	-		)	