

Trial Number: \_\_\_\_\_



# TRIAL RESULTS SHEET

Return original copy of this form with payment to: SDDA Secretary c/o 6400 Glen Knolls Dr., Ottawa, Ontario K1C 2X2

Trial Date: \_\_\_\_\_ Trial Host: \_\_\_\_\_

Trial Venue: \_\_\_\_\_ Judge: \_\_\_\_\_

*Please use a separate results sheet for each level.* THIS LEVEL:  Started  Advanced  Excellent

	Stream <i>Amateur Working</i> A / W	Dog's Name	Dog's SDDA #	Container Score	P / F	Interior Score	P / F	Exterior Score	P / F	Specials (3 Q's) Total Score
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

Total # of dogs trialed: \_\_\_\_\_ SDDA Fee per dog: \$5.00 Total Enclosed: \$\_\_\_\_\_ *(Cheque or Money Order payable to SDDA or Sporting Detection Dogs Assoc.)*

Trial Secretary: Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Dated: \_\_\_\_\_  
*(Please print)*