

Application for
AWPGA Versatile Griffon/ Versatile Griffon Excellent

Application For: (Check Box) VG VGX

Dog's registered name _____

Date of Birth _____ Sex _____

Registration number _____ Registry _____

Sire _____ Dam _____

Breeder's Name _____

Owner's Name _____

Address _____

Phone# _____ Email _____

OFA#(required for VGX) _____

Total qualifying points _____

(list points and qualifications in full (for full details see VG/VGX versatile point schedule))

Signed _____ Date _____

Complete in full, sign and submit all documentation to the Awards & Recognition Committee
Vicky Foster (ARC Chairman) P.O. Box 48, Brimfield, MA. 01010
Application deadline; May 1st

for office use only: Member status:

Title awarded:

Date received:

Date awarded:

Documentation: