

**APPLICATION FOR WORKING NUMBER**

**OWNER(S) DETAILS**

First		Surname		Membership No		
First		Surname		Membership No		
Address						
Postcode		Phone		Mobile		
Email						

**DOG'S DETAILS**

Name				DOB or Approx. Age		
Colour			Dog / Bitch*			How Long Owned
AMCUK Rescue / Other Rescue / Breeder Re-home / Home Bred (Delete as appropriate)						
Microchip Number						

**NEUTERING**

Has the Dog/Bitch been Neutered?		Yes		No	
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**BREED SPECIALIST ASSESMENT - 1**

Name of Breed Specialist				Date of Assesment		
Location of Assesment						
Comments:						

Declaration: In my opinion I do/do not\* consider the dog named above to be a purebred Alaskan Malamute

Signed				Date		
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**BREED SPECIALIST ASSESMENT - 2**

Name of Breed Specialist				Date of Assesment		
Location of Assesment						
Comments:						

Declaration: In my opinion I do/do not\* consider the dog named above to be a purebred Alaskan Malamute

Signed				Date		
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**BREED SPECIALIST ASSESMENT - 3**

Name of Breed Specialist				Date of Assesment		
Location of Assesment						
Comments:						

Declaration: In my opinion I do/do not\* consider the dog named above to be a purebred Alaskan Malamute

Signed				Date		
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DNA TEST DETAILS					
Name of DNA Tester (Committee)					
Location of DNA Test					
Date of DNA Test					
Test Report Code/Reference					
DOCUMENTS ATTACHED					
Copy of DNA Test Results		Yes		No	
Copy of Microchip Registration		Yes		No	
Veterinary Confirmation of Neutering		Yes		No	
Photos (Headshot & Side Profile)		Yes		No	
Additional Evidence (i.e. 5 Generation Certificates of Sire & Dam)		Yes		No	
<p><b>Declaration:</b> I hereby confirm that the information provided is to the best of my knowledge correct. Where I have not or am unable to provide evidence of microchipping or the veterinary surgery that carried out the neutering I certify that it is my understanding that this procedure has been carried out. I understand that the AMWA Co-ordinator and/or Committee reserve the right to decline this application. If this is the case or the dog is not confirmed as being an Alaskan Malamute my membership fee will be returned.</p>					
Owner Signature			Date		
FOR CO-ORDINATOR USE					
Date Application Received					
Application Approved		Yes		No	
Application Declined		Yes		No	
Reason why Application Declined					
Working Number Allocated		AMWA			
Date Owner(s) Notified					

V01.2014