



APDT Rally Obedience Administrative Request Form

EXHIBITOR INFORMATION			
Name:	Phone:		
Email:	Date Submitted:		
REASON FOR ADMINISTRATIVE REQUEST			
<input type="checkbox"/> New Mailing Address:			
City:	State:	ZIP Code:	
<input type="checkbox"/> New Owner:	<input type="checkbox"/> Owner Name Change:		
<input type="checkbox"/> New Co-Owner(s):	<input type="checkbox"/> Delete Co-Owner(s):		
<input type="checkbox"/> Change / Correct Dog's Registered Name:			
<input type="checkbox"/> Lost Registration Number for [dog name]:			
<input type="checkbox"/> Reprint Title Certificate (fee \$5.00)	Reg #: R-	Title:	Date:
<input type="checkbox"/> Post-Trial Research Request (include Reg #, Dog Name, Trial Date, Trial Host, Level, Judge, Score, Correction needed)			
<input type="checkbox"/> Other			

<p style="text-align: center;"><i>Please send this form via US Mail, Fax, or Email to:</i></p> <p>APDT Rally Office 101 North Main St, Suite 610 Greenville, SC 29601</p> <p>Email: rally@apdt.com Fax: 864-331-0767 Phone: 800-PET-DOGS</p>	<p style="text-align: center;">OFFICE USE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Date Received:</td> <td rowspan="3" style="width: 50%; padding: 2px; vertical-align: top;">Comments:</td> </tr> <tr> <td style="padding: 2px;">Reply Sent:</td> </tr> <tr> <td style="padding: 2px;">Initials:</td> </tr> </table>	Date Received:	Comments:	Reply Sent:	Initials:
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Reply Sent:					
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(1/2012)