



Newfoundland Club of America Draft Test Record Form

Draft Test Location _____
Test Giving Club _____ Date: _____

Owner's Name _____ NCA Member Yes No
Address: _____
City: _____ State: _____ Zip: _____
Full Name of Dog: _____
AKC #: _____ Date of Birth: _____ Sex _____
Sire: _____
Dam: _____
Breeder (s): _____ Call Name: _____
Handler's Name: _____ Entry Number: _____

INDIVIDUAL DIVISION - Draft Dog (DD)

Exercises:	Circle One	We certify that this dog qualifies for the Draft Dog Certificate:
Basic Control	Pass Fail	Yes No
Harnessing and Hitching	Pass Fail	
Maneuvering Course	Pass Fail	Judge's Signature: _____
Out of Sight Stay and Freight Load	Pass Fail	
Distance Freight Haul	Pass Fail	Judge's Signature: _____
Intriguing Distraction	Pass Fail	

NEW TITLE

REQUAL

TEAM DIVISION – Team Draft Dog (TDD)

Exercises:	Circle One:	We certify that this dog qualifies for the Team Draft Certificate:
Basic Control	Pass Fail	Yes No
Harnessing and Hitching	Pass Fail	
Maneuvering Course	Pass Fail	Judge's Signature: _____
Out of Sight and Freight Load	Pass Fail	
Distance Freight Haul	Pass Fail	Judge's Signature: _____
Intriguing Distraction	Pass Fail	

TEAM NEW TITLE

TEAM REQUAL

Handler's Signature: _____

**** I acknowledge that the spelling and titles on this record form are correct and that these titles will appear on my certificate should my dog pass this test.**

**** I agree to abide by NCA grievance process & code of sportsmanship/ethics ****