
Please use block letters

Sampling place _____ Date _____

Organizer _____

Event:

show

sighthound test

other event/test specify: _____

Name of dog _____ Identification marking _____

Breed _____ Owner/Keeper _____

dog bitch Registry number _____

I have observed and approved of the sampling process for drug test plus the sealing of the samples, and verified that the sample seal numbers are identical with the seal numbers in this form.

Signature: _____

Signature block: _____

Address: _____

Phone: _____

Seal numbers: 'A' sample _____ 'B' sample _____

random
sample

exceptionally good
performance

prearranged
sampling

other _____

came to test at _____ urine sample at _____ blood sample at _____

hair sample at _____ nose sample at _____ dog watered at _____

Doping control officer _____ functionary number _____

Assistant _____ phone _____

Specific observations concerning the dog _____

Medication over the latest 14 days _____

Signature of Doping control officer

Signature of Assistant