

Master or Achiever Team Award Application

Team Registration Number:	Date:
Dog:	
Handler:	
Address:	
City, State, Zip:	
Telephone:	
Email:	

Please indicate below the Award you are applying for by circling the Ace titles you currently have earned. Enter the dates if known.

Master Team	Master Team	Master Team	Master Team
Award Level 1	Award Level 2	Award Level 3	Award Level 4
Obedience Ace	Obedience Ace	Obedience Ace	Obedience Ace
Level 1	Level 2	Level 3	Level 4
Date:	Date:	Date:	Date:
Starter or Zoom 1 Rally Ace Date:	Advanced or Zoom 1.5 Rally Ace Date:	Pro or Zoom 2 Rally Ace Date:	ARF Ace Date:
Games	Games	Games	Games
Level 1 Ace	Level 2 Ace	Level 3 Ace	Level 4 ACE
Date:	Date:	Date:	Date:
Scent Level 1 Ace Date:	Scent Level 2 Ace Date:	Scent Level 3 Ace Date:	Scent Level 4 Ace Date:

Achiever Team	Achiever Team
Award 4	Award 5
Super Sleuth 4 Date:	Private Inv. Or Det. Diversions Date:
Ranger 4	Ranger 5
Date:	Date:
Dasher 4	Dasher 5
Date:	Date:

Thank you for supporting and playing with C-WAGS!

Submit to:

c-wags@sbcglobal.net

C-WAGS Shirley Ottmer 3693 Fairview Ave Jackson, MI 49203