



Leonberger Club of America Water Test Record Form

Water Test Location:

Club:

Date:

Owner Name:		LCA Member:	Yes	No
Address:		City:		
State:		Zip Code:		
Dog Registered Name:				
Date of Birth:		Sex:		
Sire:				
Dam:				
Breeder(s):				
Call Name:		AKC #:		
Handler Name:		Entry Number:		

Water Dog Division (WD)

Exercises	Pass	Fail
Basic Control	<input type="checkbox"/>	<input type="checkbox"/>
Single Retrieve	<input type="checkbox"/>	<input type="checkbox"/>
Drop Retrieve	<input type="checkbox"/>	<input type="checkbox"/>
Take a Line	<input type="checkbox"/>	<input type="checkbox"/>
Tow a Boat	<input type="checkbox"/>	<input type="checkbox"/>
Retrieve Off a Boat	<input type="checkbox"/>	<input type="checkbox"/>
Swim with Handler	<input type="checkbox"/>	<input type="checkbox"/>

We certify that this dog qualifies for the
Water Dog Certificate

New Title Requal

Judge's Signature: _____

Judge's Signature: _____

Water Rescue Dog Division (WRD)

Exercises	Pass	Fail
Double Retrieve	<input type="checkbox"/>	<input type="checkbox"/>
Line to Shore	<input type="checkbox"/>	<input type="checkbox"/>
Take a Life Ring	<input type="checkbox"/>	<input type="checkbox"/>
Underwater Retrieve	<input type="checkbox"/>	<input type="checkbox"/>
Tow a Boat	<input type="checkbox"/>	<input type="checkbox"/>
Rescue	<input type="checkbox"/>	<input type="checkbox"/>

We certify that this dog qualifies for the
Water Rescue Dog Certificate

New Title Requal

Judge's Signature: _____

Judge's Signature: _____

Water Rescue Dog Excellent Division (WRDX)

Exercises	Pass	Fail
Abandoned Boat	<input type="checkbox"/>	<input type="checkbox"/>
Multiple Person Rescue	<input type="checkbox"/>	<input type="checkbox"/>
Unconscious Victim	<input type="checkbox"/>	<input type="checkbox"/>
Capsized Raft	<input type="checkbox"/>	<input type="checkbox"/>
Line to Stranded Water Vessel	<input type="checkbox"/>	<input type="checkbox"/>
Team Rescue	<input type="checkbox"/>	<input type="checkbox"/>

We certify that this dog qualifies for the
Water Rescue Dog Excellent Certificate

New Title Requal

Judge's Signature: _____

Judge's Signature: _____

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 (AKC, LCA and CKC titles only). I agree to abide by the LCA Constitution and all AKC Rules applying to dog shows.*