SPECIALTY SHOW CRITIQUE FORM

RAINEE NAME:		Date:	
BREED:			
1			
2			
3			
4			
5			
A11 1 10 11 11 01	SHOW SECRETARY NAME	SIGNATURE	DATE
Attendance at Specialty Show:	MENTOR NAME	CIONATURE	DATE
MENTOR COMMENTS	MENTOR NAME	SIGNATURE I certify that I have today examined the dog described in this critique and discussed the exhibit with the Trainee.	DATE
	NAME	SIGNATURE	DATE
Group Co-Ordinator or Assistant Co-Ordinator			