

Badger State HRC, Inc.
Hall Of Fame
Nomination Form

Name of Dog _____ Dog UKC Registration Number _____

Breed _____ Male _____ Female _____ Date of Birth _____

Name of Registered Owner _____

Owner's Street Address _____

City _____ State _____ Zip Code _____

OR

Name of BSHRC member _____

Street Address _____

City _____ State _____ Zip Code _____

Indicate which Induction Criteria the nominee is being nominated for _____

Citation/Justification

Submitted By _____ Date _____