

**CRATING AND PARKING REQUEST FORM**

(Complete form **WHEN TRIAL OPENS** and submit

**NO LATER THAN CLOSING** to Sandy Fisher at [sandyfisher1080@gmail.com](mailto:sandyfisher1080@gmail.com)).

**PLEASE EMAIL ONLY ONE REQUEST PER CLUB**

Spaces limited - requests honored by date of receiving.

**Submit (scan or picture) a separate form per trial entered.**

**THOSE REQUESTING SPECIAL CRATING OR PARKING MUST**

**VOLUNTEER TO WORK EACH DAY.**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

CLUB (one form per trial): \_\_\_\_\_

DATE/DAYS requesting: \_\_\_\_\_

REQUESTING CRATING DOWNSTAIRS? \_\_\_\_\_

SIZE AND NUMBER OF CRATES? \_\_\_\_\_

CAN YOU STACK CRATES? \_\_\_\_\_

REQUESTING PARKING BY BUILDING? \_\_\_\_\_

REASON FOR REQUESTS (crating out of car, handicap, recent surgery, etc):

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