APPLICATION for

The Ruth VanKeuren Memorial Fund for MAC Junior Handlers

Sponsored by the Minnesota Agility Club, Inc.

The Minnesota Agility Club (MAC) is pleased to sponsor the Ruth VanKeuren Memorial Fund for MAC Junior Handlers. This fund was established to support youth attendance at a national agility event.

Qualifications: This memorial fund is available to all eligible junior handlers. To be eligible they must have completed the following for the year and venue they are applying for: Shown in a MAC trial (AKC, NADAC, USDAA or CPE sanctioned); live within Minnesota or the western counties of WI including Barron, Burnett, Douglas, Dunn, Pepin, Pierce, Polk or St Croix; volunteered as required - in a non junior handler class at both a MAC trial and at one other agility trial of their choosing; and who are 18 years of age or younger at the time of the competition or event for which these funds are sought.

This application is to be completed by the qualified junior handler for consideration of monetary funds to assist attendance at an approved event.

APPLICATION DEADLINE is a minimum of 45 days prior to the event.

riease	Print
1.	Name
	Home Address
	City, State, Zip
4.	Parent(s) or Legal Guardian
5.	County of residence
6.	Parents Home Telephone; Work phone
	Best time to call
7.	Date of Birth Age
8.	School or Institute you currently attend with address
9.	Name and Breed of any dog(s) you have shown at MAC trials – please indicate
	the month & year, which venue (AKC, NADAC, USDAA or CPE) you showed at and which classes you were entered in

10.	What agility shows have you volunteered at? Please include the name of the club, the agility venue (AKC, NADAC, USDAA or CPE), the month and year of the show and the names of classes you volunteered for	
11.	Please give details on the National show or event or training seminar you wish to attend (list the name, dates, location and what type of event this is. If you are applying for consideration of a training seminar, include who is hosting the show and who the trainer is.) Will you be showing/training or observing? If showing/training, which classes do you wish to enter and what are the entry fees? If observing, what do you hope to learn from this event?	
12.	Would you be willing to share your experiences of this event and how you benefited by it in the form of a letter or speak to members at a MAC meeting? Please indicate what you may be willing to do. (Please note - This will not affect the amount of funds disbursed.)	
my kno ground receive	y that I have truthfully and accurately answered the above questions to the best of owledge and ability. I understand any false or concealed information will be as for rejection of my application. Furthermore, I hereby understand that all funds and from MAC will be used for the purpose stated herein and authorize any funds will be to me and my parent(s) or legal guardian signed below.	
Signatu	are of Applicant Date	
Signatu	ure of Parent or legal Guardian	
	Name of Parent or legal Guardian (if you are a minor & your application is ed, this name will be included on the check)	
Your N	Mailing Address:	
MAC - c/o Ma	t your completed application to: - Ruth VanKeuren Memorial Fund Application rtha Healy - 370 th Avenue	

Hillman, MN 56338