



# Siberian Husky Club of America, Inc.

## SHCA Working Pack Dog Program

### Impartial Observer/Witness Form for a Group Hike

Group Leader's Name (print) \_\_\_\_\_

Date of Hike: \_\_\_\_\_

Trail: \_\_\_\_\_

Location (Park name, City, and State): \_\_\_\_\_

I certify as group leader of this hike, that the below-named Siberian Huskies participated in and completed the hike on this date.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Group Hike Participants

Dog's Name	Owner's or Handler's Name
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

This is to certify that I witnessed the above-named Siberian Huskies backpacking on this date on the above-named trail.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_