

PWDCA WATER TRIAL DOG AGGRESSION OR GRIEVANCE WITNESS STATEMENT

Host Club: _____

Trial Date: _____

Witness Name: _____

Phone: _____

Witness email: _____

Check one: Grievance Dog Aggression

Please provide a concise description of the event(s), action(s) or inaction(s) that you witnessed in relation to the Grievance or Aggression incident. Please be as specific as possible when stating names of those involved, locations, and times of the alleged action/inaction. (Use the back of this page if needed.)

I affirm that the information on this form is true and that I personally witnessed the action/inaction described.

Signature: _____ Date: _____

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