



PLTA PACK TRIAL CERTIFICATION FORM

Event Name: _____ Event Location: _____ Date of ***Trials***: _____

Trial Chairperson: _____ Certifier: _____ ***Please fill out one form per day of trials***

	Basic / B-String	Advanced/ A-String	Master/ M-String	Elite/E- String
Distance:				
Elevation:				

Time (hr./min)

Allowed:				
*Elapsed:				

Weather Conditions (Avg. temp., sunny, cloudy, rain, snow, windy, etc.)

Did Elevation gains warrant change in mileage? No Yes (Explain below)

Did trail conditions warrant changes in trail obstacles? No Yes (Explain below)

Did anyone apprentice with you? No Yes (Explain below)

Were any accidents or injuries reported? No Yes (Explain below)

I certify that this course meets all the minimum requirements as set forth in the current handbook of General Procedures, Regulations, and Guidelines for PLTA Pack Llama Trials. This includes conducting a pre-trial 'walk through', verification that all manageability tasks were conducted, and that stewards and handlers were briefed.

Course Certifier Signature

Certifier #

Date

Comments: _____
