



Certifier Statement

I have read and understood the principles of the Camelid Companion Certification program and agree to certify llamas on the pass/fail criteria as spelled out in the task descriptions.

NOTE: All Certifiers must be ILR members.

Signed Name

Date

Printed Name

ILR Owner Code

Address

City / State / Zip

Contact Information:

Phone Numbers (indicate cell, home, business)

E-mail address

If not a sanctioned ILR judge or apprentice, please obtain the signature of a person who has been qualified to certify animals for the CCC.

I recommend the above individual to be recognized as a certifier for the CCC.

Signed Name

Date

Printed Name