



NAME OF AFFILIATE: _____

TRIAL SECRETARY: _____ PHONE: _____

ADDRESS: _____

The committee requests your services in the position of Lure Operator at their

SprintDog Trial

to be held at _____ on

_____ commencing at _____

Please complete the section below and return it to the Trial Secretary.

Please Note: If, for any reason, you are unable to fulfil this agreement, it is your responsibility to notify the Trial Secretary.

LURE OPERATOR TO COMPLETE

I, _____ accept the appointment as Lure Operator.

at your SprintDog Trial

to be held at _____ on

_____ commencing at _____

ADDRESS: _____

PHONE: _____

PETROL / EXPENSES: _____ ACCOMMODATION: _____

SIGNED _____ DATE: _____