



NAME: _____

ADDRESS: _____

_____ Post Code _____

PHONE: (Bus) _____ (Home) _____ DOGS Victoria M'SHIP NUMBER: _____

EMAIL: _____

TRAINEE AGILITY JUDGE - APPLICATION TO JOIN AGILITY JUDGES TRAINING SCHEME (For those persons entering the Agility Judges Training Scheme only) - (See regulations relating to "How to become an Agility Judge").

I am applying for listing as a trainee Judge for: Agility

I have been a member of DOGS Victoria (Victorian Canine Association Inc.) since _____ (state year of joining) (minimum membership is three (3) years). I have trained and trialed a dog to an AD title and one pass towards an ADX title. Give details of practical experience, and name and registered number of AD pass dog (if insufficient room attach separate sheet).

TRAINEE GAMES JUDGE - APPLICATION TO JOIN GAMES JUDGES TRAINING SCHEME

I am applying for listing as a trainee Judge for: Games

Criteria for games judges application – minimum two years agility/jumping judge licence
I have judges a minimum of four trials in the last two years.

FITNESS TO JUDGE

"I declare that I am physically fit and capable of judging in accordance with the Rules and if required I am prepared to undergo a medical fitness test and/or vision test at the discretion of the Member Body of ANKC Ltd. I further accept that my Member Body may at its absolute discretion refuse to grant any renewal of licence and may cancel or suspend for any period or vary in any way any licence already granted or to be granted." (05/93, 7.2.1) (Amended 10/13 – 5.6.4) (Amended 10/14, 7.5.12) (Amended 08/15, EM#117) (Amended 10/15, 7.5.1.1)

Signed: _____ Date _____

**PLEASE ENCLOSE FEE OF \$83.50 WITH YOUR APPLICATION TO ENTER THE JUDGES TRAINING SCHEME
APPLICATION WILL NOT BE ACCEPTED WITHOUT LODGEMENT FEE
(Non-Refundable)**

t: 9788 2500 f: 9788 2599

events@dogsvictoria.org.au

655 Westernport Hwy Sky, VICTORIA 3977

www.dogsvictoria.org.au



(Only payable when first entering the Judges' Training Scheme)

METHOD OF PAYMENT: CASH CHEQUE CREDIT CARD
(Please tick)

CREDIT CARD DETAILS: Mastercard VISA Expiry date: _____

Credit Card Number:

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Signature: _____ Amount Paid: \$ _____