

# APPLICATION TO JOIN THE OTEC JUDGES TRAINING SCHEME

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

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

EMAIL: \_\_\_\_\_

**1. TRAINEE OTEC JUDGE - APPLICATION TO JOIN OTEC JUDGES TRAINING SCHEME - See regulation 9.2.1 relating to the current Obedience Tracking and Endurance Judges Training and Assessment Scheme**

*I am applying for listing as a Trainee Judge for:*

(list class) \_\_\_\_\_

I have been a member of an ANKC Member Body since \_\_\_\_\_ (state year of joining)  
(minimum membership is five (5) years).

I have trained and trialed a dog to a pass in the discipline applied for.

Give details of practical experience: (if insufficient room attach separate sheet)

\_\_\_\_\_  
\_\_\_\_\_

I have trained and trialed a dog to at least one pass in the Novice Obedience class \_\_\_or have trained and trialed a dog

to a title in Rally Advanced\_\_\_ Tracking \_ TSD \_\_\_ or Endurance\_\_\_

Dog's registered name: \_\_\_\_\_

Dog's registered number: \_\_\_\_\_

OR

**2. APPLICATION FOR ADDITIONAL LICENCE See regulation 9.2.1 relating to the current Obedience, Tracking and Endurance Judges Training and Assessment Scheme, (For those persons applying for the Obedience Judges Training Scheme only)**

*I wish to apply to be trained for the following licence:*

(list class) \_\_\_\_\_

**Please return this form with fee to [events@dogsvictoria.org.au](mailto:events@dogsvictoria.org.au)**

t: 9788 2500 655 Westernport Hwy Sky, VICTORIA 3977

**[www.dogsvictoria.org.au](http://www.dogsvictoria.org.au)**



**DOGS**  
VICTORIA  
YOUR CANINE COMMUNITY  
Est. 1930

## APPLICATION TO JOIN THE OTEC JUDGES TRAINING SCHEME

**PLEASE ENCLOSE FEE OF \$83.50 WITH YOUR APPLICATION TO ENTER THE JUDGES TRAINING SCHEME**  
**APPLICATION WILL NOT BE ACCEPTED WITHOUT LODGEMENT FEE**  
**APPLICATIONS CLOSE: 1 October each year**  
**(Non-Refundable)**

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

CREDIT CARD DETAILS: Mastercard ☐ VISA ☐ CVV \_\_\_\_\_ Expiry date: \_\_\_\_\_

Credit Card Number:

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Signature: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

Name on card: \_\_\_\_\_

Direct Deposit:

Victorian Canine Assoc. Bendigo Bank BSB: 633 000 A/C: 112 552 542

Direct Deposit Reference: \_\_\_\_\_

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