



**APPLICATION FOR ASSOCIATE GUNDOG  
TO COMPETE IN RETRIEVING ABILITY TESTS FOR GUNDOGS**

This application must be approved before an Associate Gundog can compete in its first Retrieving Ability Test for Gundogs.

Member's name: .....

Membership number: .....

Address: .....

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Telephone number: ..... Mobile: .....

Email address: .....

Registration Number of the Associate Dog: .....

Microchip Number of dog: .....

Date of Birth of dog: .....

Registered Name of dog: .....

Breed of dog: .....

Sex of dog: ..... (neutered)

**I confirm that the dog which is the subject of this application is a pure bred Gundog and is not a cross breed.**

I include with this Application two photos of the dog, one in profile (standing) and one from the front (standing), which are endorsed on the reverse with the registration number of the dog and my signature.

.....  
(Signed by member)

*This Application and the photos must be forwarded to [insert member body name here] (attn RAFT Committee) directly by the member together with the current Associate Dog certificate.*