



A.C.T. Canine Association Inc.  
ACT Canine Association Inc. (ABN 11150955611) trading as Dogs A.C.T.  
Exhibition Park, Federal Highway, Mitchell, ACT  
PO Box 815 Dickson ACT 2602 Phone 02 6241 4404  
Email: admin@dogsact.org.au or visit: <http://www.dogsact.org.au>

## 2019 CONFORMATION JUDGES' TRAINING & EXAMINATION PROGRAM

### TRAINEE JUDGE APPLICATION FORM

\_\_\_\_\_ Dogs ACT Membership No \_\_\_\_\_  
(First Name) (Last Name)

Address \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I hereby apply to participate in the following course(s) **tick either Single Breed or Group Course:**

Single Breed Training Course	<input checked="" type="checkbox"/>	Breed: _____
Group Training Course Note: • Trainees may only study 1 Group initially & up to 3 Groups thereafter • Qualifications include a pass in the Aspiring Judges' Course or for a Sub-Group Test or an overall Theory Examination pass.	<input checked="" type="checkbox"/>	Group (include current qualifications for group): _____ Group (include current qualifications for group): _____ Group (include current qualifications for group): _____

The CJTC may require applicants to provide additional information.

#### DECLARATION:

I hereby apply to enrol in the Dogs ACT 2019 Conformation Judges' Training & Examination Program on the terms and conditions set out in the Dogs ACT Conformation Judges' Training and Examination Policy ([link](#)).

I declare that I am physically fit and capable of judging in accordance with the ANKC Regulations and Code of Conduct and if required I am prepared to undergo a medical fitness test and/or vision test at the discretion of Dogs ACT. I further accept that Dogs ACT 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. ( Ref ANKC Regs Part 2 Judges located at - [http://ankc.org.au/media/9295/2-ankc-ltd-reg2\\_judges\\_oct-18.pdf](http://ankc.org.au/media/9295/2-ankc-ltd-reg2_judges_oct-18.pdf) )

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

This Application must be received by Dogs ACT, together with the application fee of **\$100** per Course, **NO LATER** than **2:30pm** on **Thursday 28 March 2019** either by post to Dogs ACT, PO Box 815, Dickson ACT 2602 or delivered by hand during Dogs ACT office hours or email.

Credit Card Details      Mastercard ☐      Visa ☐      Expiry Date      /

Card Number															
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Please debit my credit card the amount of \$ \_\_\_\_\_ Signature: \_\_\_\_\_

FEES ALSO PAYABLE BY CHEQUE OR MONEY ORDER – ALL REMITTANCE PAYABLE TO DOGS ACT

*Dogs A.C.T. - Promoting Responsible Dog Ownership*