



A.C.T. Canine Association Inc.

**APPLICATION FOR ACCEPTANCE
TO THE 2019 FOUNDATION
TRICK DOG
JUDGES TRAINING SCHEME**

APPLICANT INFORMATION

Name:		First Name:	
Current Address:			
City:	State:	Postcode:	
Phone:		Mobile:	
Email:			
Dogs ACT Membership No:		Date Joined:	

APPLICANT DECLARATION

I declare that:

(i)	I am a licensed ANKC Dances with Dogs judge
(ii)	I have fulfilled all the requirements for the maintenance of a Dances with Dogs judges license
(iii)	I will apply for a Foundation Trick Dog Judge license within sixty (60) days of implementation of the Trick Dog discipline (1 January 2020)
(iv)	I will satisfactorily complete an open book examination on the Rules for the Conduct of Trick Dog Tests and Trick descriptions.

APPLICANT'S SIGNATURE

Signed:	Date:
---------	-------

**APPLICATION FEE: \$65.00
PAYABLE AT THE TIME OF SUBMISSION OF APPLICATION**