



A.C.T. Canine Association Inc.

**APPLICATION FOR ACCEPTANCE TO THE 2025 SCENT WORK JUDGES TRAINING SCHEME**

**CLASSES: EXCELLENT/MASTER**

**APPLICANT INFORMATION**

Surname:		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 member of an ANKC Member Body for a period of not less than three (3) years prior to the application and a current financial member of Dogs ACT.
- (ii) I am over eighteen (18) years of age by the closing date for applications.
- (iii) I am resident in the ACT.
- (iv) I have personally trained and trialled a dog in the Scent Work Excellent Class.
- (v) I have stewarded at least once in each of the Elements in the Excellent and Master Classes at a minimum of three (3) Scent Work trials in the last three (3) years.
- (vi) I have judged at least three (3) different Elements in each of the Novice and Advanced Classes at a minimum of three (3) Scent Work trials

**APPLICANT'S SIGNATURE**

Signed:	Date:
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**APPLICATION FEE: \$65.00**

**THIS FEE MUST BE PAID AT THE TIME OF SUBMISSION OF THE APPLICATION**

Preferred method of payment is by direct debit BSB:(112908) Account: 050051244 (Ref: SWsurname – please forward payment receipt with application)