



# APPLICATION TO ASPIRE AS A TRACKING TRIAL JUDGE

FULL NAME : (Mr/Mrs/Ms/Miss) \_\_\_\_\_  
Surname Christian Name

ADDRESS : \_\_\_\_\_  
P/Code \_\_\_\_\_

TELEPHONE No. : \_\_\_\_\_ (Home) \_\_\_\_\_ (Mobile)

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

MEMBERSHIP No. : \_\_\_\_\_

DATE OF BIRTH : \_\_\_\_\_ (applicant must be at least 18 years of age).

**APPLICATION MUST BE SUBMITTED WITH THE APPROPRIATE FEE BEFORE CLOSING DATE AS ADVERTISED IN THE CANINE NEWS to DOGS WEST 602 WARTON ROAD SOUTHERN RIVER WA 6110**

### APPLICANT'S DECLARATION

I declare that I am physically fit and capable of judging in accordance with the Rules and if required I am prepared to undergo a medical fitness test and/or vision test at the discretion of the Member Body of ANKC Ltd. I further accept that my Member Body 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. (05/93, 7.2.1) (Amended 10/13 – 5.6.4) (Amended 10/14, 7.5.12) (Amended 08/15, EM#117) (Amended 10/15, 7.5.1.1)

SIGNATURE : \_\_\_\_\_ DATE: \_\_\_\_\_

NOTE: If application is successful, the applicant must achieve a pass in a written examination on the Rules for Tracking Trials.

**PLEASE COMPLETE IN FULL ALL REQUIREMENTS ON THE REVERSE OF THIS FORM.**

### PAYMENT BY CREDIT CARD

Expiry Date: \_\_\_\_ / \_\_\_\_ Amount \$ \_\_\_\_\_  
Cardholders Name: \_\_\_\_\_  
Card No. [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ]  
Signature: .....

- Bankcard
- Mastercard
- Visa

### OFFICE USE ONLY

Date Received:  
CAWA Membership: Fin/Unfin  
Updates  
ANKC Database:  
Judges Master:  
Judges List:  
CAWA Website:  
ANKC Website :

## INFORMATION REQUIRED FROM ASPIRING TRACKING TRIAL JUDGES

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1. Length of continuous membership of Dogs West or other ANKC affiliate \_\_\_\_\_ years.

Dogs West Membership No.(s) and years \_\_\_\_\_

(Minimum period of 3 years prior to the date of application.)

(The Association will consider an application from a person transferring from another State or Territory of Australia, or overseas, who can provide evidence that his/her canine experience extends over a minimum period of three (3) consecutive years as a member of the canine controlling body in the State, Territory or Country of prior residence).

2. I have trained a dog and trialed a dog to a Tracking Dog title and in addition have stewarded at least two sanctioned Tracking trials.

Details:

3. Other appropriate information in support of this application. (If insufficient space, further detail maybe attached.

4. Should you wish to apply for inclusion under the special eligibility clause, please attach written proof of your case.

I certify that the above (and attached) information is correct and that I am physically capable of judging in accordance with the Rules and Regulations and in the normally accepted manner.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**ALL REQUIREMENTS MUST BE FULLY COMPLETED PRIOR TO SUBMITTING THIS FORM.**

**APPLICATIONS WILL NOT BE CONSIDERED THAT ARE NOT ACCOMPANIED WITH ALL OF THE ABOVE REQUIREMENTS.**