

The Canine Association of Western Australia (Inc)

APPLICATION FORM – ASSESSMENT & EXAMINATION

FIIII NAME: (Mr/N	Arc/Mc/Mis	s)		M/ship No	١٠						
		<i>-</i> ,		P/Code:	<i></i>						
				•							
TELEPHONE No. : _		(Home)	(Mobile)	Email:							
I WISH TO APPLY :	- (Please tic	k appropriate box/es).									
a.		TO HAVE A FIRST ASSESSMENT (Required for FIRST 4 GROUPS O	NLY. Application MUST be sub			CLUB of judging appointment.)					
b.		TO HAVE A SECOND, SUBSEQUE (Application MUST be submitted **All Trainees**				CLUB					
с.		TO SIT THE PART THEORY EXAM (Fees Apply)	IINATION Part A OR Pa	ort B 🔲	GROUP						
d.		FOR A PRACTICAL EXAMINATIO	N	G	ROUP						
		(Fees Apply)	N	G	KOUP	<u> </u>					
CLOSING DATES AI	ND ADDRES	S									
F14. <u>A</u>	pplications	and Renewals									
	14.1		ern Australia by 1st Decembe		•	anied by relevant fee and submitted to veekend or public holiday, by close of					
	14.2	9	ee Judge status shall be made			where this falls on a weekend or public					
	14.4	Application to sit The Theory Ex	am Parts "A "and "B" shall be	made on the a	ppropriate for	m and accompanied by the relevant n July and October each year. 08/11					
	14.5	Applications to sit a Practical E	xamination shall be made or	n the appropri	ate form and	accompanied by the relevant fee and where this falls on a weekend or public					
	14.6		on the appropriate Canine the due date will not be accepted by correct fee will not be a	Association of oted.		of the Theory Exam (09/08) (12/09) stralia form and accompanied by the					
The app	propriate fe	e and all relevant documentation r			rith application	and sent to:					
	SOUTHE	est rton Road RN RIVER WA 6110 9455 1188									
ADDITIONAL INFO	RMATION F	REQUIRED FOR PRACTICAL EXAMIN	ATION APPLICATION.								
1.	Evidenc	e of Stewarding during previous 2 y	ears. (Stewarding Record Card	attached). For	1 st and 2 nd grou	ups only.					
2.	Total nu	Total number (minimum 50 dogs) of dogs judged									
3.	Properly	completed Critiques for at least 50	dogs, 5 of which must be at a	Specialist Sho	w	<u>_</u> .					
APPLICANT'S END											
In consideration of	this applica	ation I agree to be bound by the Cor	nstitution, Rules and Regulatio	ns of The Canir	ne Association o	of Western Australia (Inc.)					
SIGNATURE:			DATE:								
APPLICATIONS INC	ORRECTLY (DR NOT FULLY COMPLETED WILL <u>NC</u>	<u>DT</u> BE CONSIDERED.								
Date received by C	hief Executi	ve Officer:	_ Checked & Acknow	wledged:							

OPEN SHOWS / PARADES											FORM J1			
BREEDS														T O T A L
TOTAL														