



NAME: \_\_\_\_\_

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

\_\_\_\_\_ Post Code \_\_\_\_\_

PHONE: (Bus) \_\_\_\_\_ (Home) \_\_\_\_\_ DOGS Victoria M'SHIP NUMBER: \_\_\_\_\_

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

**1. APPLICATION FOR WRITTEN EXAMINATION FOR RAFT JUDGES LICENCE** See regulation 10.3 relating to the current Retrieving & Field Trial Committee Judges Training and Assessment Scheme

*I wish to apply to be tested for the following licence (list class)*

\_\_\_\_\_

(a) State here experience, naming trial and classes or tests judged (see logbook)

\_\_\_\_\_

(b) I attended the following lectures and practical instruction during the past year. (see logbook)

\_\_\_\_\_

(c) I stewarded at the following trials during the past year. (see logbook)

\_\_\_\_\_

**Note: Application** for distance Written assessment if over 100 kilometres from the Examination Centre. Please note details of regional assessment centre here. (not necessary to be detailed until the final application is lodged).

**PLEASE ATTACH COMPLETED LOGBOOK WITH THIS APPLICATION.**

Signed: \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE ENCLOSE FEE OF \$53.50 WITH YOUR APPLICATION TO ATTEND THE WRITTEN EXAMINATION**

**APPLICATION WILL NOT BE ACCEPTED WITHOUT LODGEMENT FEE**

**APPLICATIONS CLOSE: 1 May each year**  
*(Non-Refundable)*

METHOD OF PAYMENT: CASH  CHEQUE  CREDIT CARD   
(Please tick)

CREDIT CARD DETAILS: Mastercard  VISA  Expiry date: \_\_\_\_\_ CVV: \_\_\_\_\_

Credit Card Number:

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Signature: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

**t: 9788 2500 f: 9788 2599**

[events@dogsvictoria.org.au](mailto:events@dogsvictoria.org.au)

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