



NAME OF AFFILIATE: \_\_\_\_\_

TRIAL SECRETARY: \_\_\_\_\_ PHONE: \_\_\_\_\_

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

The committee requests your services in the position of Lure Operator at their

SprintDog Trial

to be held at \_\_\_\_\_ on

\_\_\_\_\_ commencing at \_\_\_\_\_

Please complete the section below and return it to the Trial Secretary.

**Please Note:** If, for any reason, you are unable to fulfil this agreement, it is your responsibility to notify the Trial Secretary.

**LURE OPERATOR TO COMPLETE**

I, \_\_\_\_\_ accept the appointment as Lure Operator.

at your  SprintDog Trial

to be held at \_\_\_\_\_ on

\_\_\_\_\_ commencing at \_\_\_\_\_

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

PHONE: \_\_\_\_\_

PETROL / EXPENSES: \_\_\_\_\_ ACCOMMODATION: \_\_\_\_\_

SIGNED \_\_\_\_\_ DATE: \_\_\_\_\_