

## 2024/2025 CONFORMATION JUDGES EDUCATION PROGRAM APPLICATION TO SIT THE GROUP/SINGLE BREED PRACTICAL EXAMINATION

(Trainee Judges may undertake an examination for ONLY one (1) Group for which they qualify)

Group:	Membership No.
Mr/Mrs/Ms/Miss	
(First Name) Address	(Last Name)
Suburb	Postcode
Phone:(H)	(M)
Email:	
DECLARATION:	
	the terms and conditions set out in DOGS NSW Regulations, Part III- and Timetable published on DOGS NSW website <u>www.dogsnsw.org.au</u>
	povenamed Regulations any decision of the DOGS NSW Board of Directors on
any matter arising or relating to the Program or the K	egulations shall be final and binding.
declare that I am physically fit and capable of judging a medical fitness test and/or vision test at the discret refuse to grant any renewal of licence and may cancel	g in accordance with the Regulations, and if required I am prepared to under tion of DOGS NSW. I further accept DPGS NSW may at its absolute discreti or suspend for any period or vary in any way any licence already granted or
I declare that I am physically fit and capable of judging a medical fitness test and/or vision test at the discret	g in accordance with the Regulations, and if required I am prepared to under tion of DOGS NSW. I further accept DPGS NSW may at its absolute discreti or suspend for any period or vary in any way any licence already granted or
I declare that I am physically fit and capable of judging a medical fitness test and/or vision test at the discret refuse to grant any renewal of licence and may cancel be granted. Or may grant, in part, only an application Signature of Applicant:  Signature of Group Co-Ordinator/Assistant that the transfer of Application must be received with the requirements.	g in accordance with the Regulations, and if required I am prepared to under tion of DOGS NSW. I further accept DPGS NSW may at its absolute discretifor suspend for any period or vary in any way any licence already granted or a for renewal of licence.  Date:
declare that I am physically fit and capable of judging a medical fitness test and/or vision test at the discret refuse to grant any renewal of licence and may cancel be granted. Or may grant, in part, only an application be granture of Applicant:  Signature of Group Co-Ordinator/Assistant that the transfer on Friday 31 October 2025 by hand, post to PO E	g in accordance with the Regulations, and if required I am prepared to under tion of DOGS NSW. I further accept DPGS NSW may at its absolute discretified or suspend for any period or vary in any way any licence already granted or for renewal of licence.  Date:  Date:  ired fee of \$114.00 received by DOGS NSW, NO LATER than 4.00pm
I declare that I am physically fit and capable of judging a medical fitness test and/or vision test at the discret refuse to grant any renewal of licence and may cancel be granted. Or may grant, in part, only an application Signature of Applicant:  Signature of Group Co-Ordinator/Assistant that the transfer Application must be received with the requion Friday 31 October 2025 by hand, post to PO ECCEPTICARD DETAILS	g in accordance with the Regulations, and if required I am prepared to under tion of DOGS NSW. I further accept DPGS NSW may at its absolute discretified or suspend for any period or vary in any way any licence already granted or for renewal of licence.  Date:  Date:  ired fee of \$114.00 received by DOGS NSW, NO LATER than 4.00pm