



## DOGS NSW – REPRESENTATIVE REPORT DRAFT TEST

1. The DOGS NSW Representative is appointed by authority of Regulations Part II – Show 2.8.
2. The Representative's sole duty is to observe and make an unbiased report to The Secretary of DOGS NSW on matters affecting the general conduct of the Trial and in particular any matters of controversy, which arose, and on all breaches of the Regulations, which occurred thereat.
3. The Representative shall not participate in any decision-making processes pertaining to or affecting the conduct of the Trial. In particular the Representative should not interpret Regulations or express an opinion in relation to any procedure, irregularity, protest or complaint.
4. The Representative should refer any inquiry in relation to the show directly to the Affiliate or Committee conducting the Trial.
5. The Representative should attend and observe any inquiry held at the Trial in relation to an Aggressive Dog Incident for the purposes of reporting only. Any party to the inquiry should not ask the Representative for advice.
6. The Representative's Report must be lodged to the Secretary DOGS NSW no later than seven (7) days after the close of the show.

Test Held By:	On:	At:
Representative's Name:	Membership No:	
Address:		

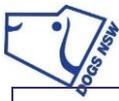
At what time did you report to the Draft Test Secretary?	<input type="checkbox"/> AM	<input type="checkbox"/> PM
Do you possess an up-to-date copy of DOGS NSW Regulations and the ANKC Ltd Rules for the Conduct of Drafting Test?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did the Affiliate/Committee have a copy of the Rules and Regulations available?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Did a member of the Club's Committee complete the "Pre-Event Safety Checklist"?</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

### VETTING

Did the veterinary examination commence at the time specified in the Schedule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Was the veterinary examination conducted at a reasonable distance from the Test area?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
To your knowledge were all bitches vetted prior to competing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Were all bitches in oestrus barred from the Test grounds?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did the Veterinary Officer retain the exhibit card of any exhibit that was rejected?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Was a Veterinarian on call?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

### CATALOGUE

Did the catalogue contain the following?	
A statement on the cover that the competition is conducted under DOGS NSW Rules & Regulations and a copy of the same may be perused at the Secretary's Office?	<input type="checkbox"/> YES <input type="checkbox"/> NO
The name of DOGS NSW Representative?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**DOGS NSW – REPRESENTATIVE REPORT DRAFT TEST**

The name of the Test Officials?	<input type="checkbox"/> YES <input type="checkbox"/> NO
The name (s) of the Judge (s)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
The registered name, call name, registration number and breed, sire, dam, date of birth, sex, breeder, owner of each dog exhibited?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were the exhibits catalogued in numerical order?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**GENERAL**

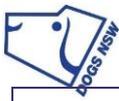
Did the Event start on time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did the Trial stop when the temperature reach 30 degrees?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did the trial stop due to heat or extreme weather?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were all judges available at the starting time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the Trial held at the stipulated venue?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the first aid kit sighted?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were all the advertised amenities available?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were exhibits judged in order where practicable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were all Judges satisfied with the ring, sound system and organisation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were the Test and presentation concluded in reasonable daylight or if a night competition, by midnight?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did stewards examine exhibitor's cards for Affiliate's name, date and vetted stamp?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was there sufficient space between the Test rings?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did the Affiliate supply you with a stamped addresses envelope to post this report?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**CASUAL VENDORS – ORCHARD HILLS**

Were there any Causal Vendors on the grounds during the Test?	<input type="checkbox"/> YES <input type="checkbox"/> NO
List the names of the Casual Vendors and services provided:	

**PROTESTS AND/OR AGGRESSIVE DOG REPORTS**

Were there any complaints or protests lodged?	<input type="checkbox"/> YES <input type="checkbox"/> NO
---	--



## DOGS NSW – REPRESENTATIVE REPORT DRAFT TEST

If so, what are the names of the parties involved:

Was the complaint made in writing and lodged with an official of the Affiliate?

YES  NO

Briefly describe the nature of the complaint:

Was there a hearing conducted by the Draft Test Committee:

YES  NO

How soon after the initial complaint was that hearing convened?

Were all parties given an opportunity to present their explanation of the incident?

YES  NO

Were parties to the complaint given the opportunity to ask questions of all other parties and witnesses?

YES  NO

What are the names of witnesses and what was their involvement?

What finding or action did the Draft Test Committee take?

SIGNATURE:

DATE:



JUDGES

ALL JUDGES WILL NEED TO SIGN THIS FORM INDICATING THE CONDITION OF THE RING AND EQUIPMENT:

COMMENTS	JUDGES NAMES & SIGNATURE
	NAME:
	SIGNED:

COMMENTS	JUDGES NAMES & SIGNATURE
	NAME:
	SIGNED:

COMMENTS	JUDGES NAMES & SIGNATURE
	NAME:
	SIGNED:

COMMENTS	JUDGES NAMES & SIGNATURE
	NAME:
	SIGNED:

The completed application should be forwarded to: The Secretary, DOGS NSW, P.O. Box 632, St Marys NSW 1790  
Royal New South Wales Canine Council Ltd ABN 69 062 986 118 trading as DOGS NSW  
Phone 02 9834 3022 or email [info@dogsnsw.org.au](mailto:info@dogsnsw.org.au)