



DOGS NSW – SCENT WORK REPRESENTATIVE REPORT

The DOGS NSW Representative is instructed not to endeavour to interpret any regulations nor to express any opinion of any irregularity, protest or complaint. The Representative's sole duty is to observe and make an unbiased report on matters affecting the conduct of the test. The Representative is in no way to interfere or make decisions pertaining to the running of the test. Any matter of order or practice, any complaint or protest, and in fact, anything relating to the fixture must be referred to the committee of the Affiliate conducting the Trail.

Held By:	On:	At:
Representative's Name:	Membership No:	
Address:		
Signature:		
This report must be lodged within seven (7) days of the completion of the test.		
Do you possess an up-to-date copy of the ANKC Ltd Rules for the Conduct of Scent Work?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Did a member of the Club's Committee complete the "Pre-Event Safety Checklist"?	<input type="checkbox"/> YES <input type="checkbox"/> NO	

CATALOGUE

Did the catalogue contain the following?	
The name (s) of the Judge (s)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
The registered name, number, birth date, sex and breed of each Main/Limited registered dog exhibit?	<input type="checkbox"/> YES <input type="checkbox"/> NO
The registered name and number only of each Associate/Sporting registered 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 competition start on time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did the advertised judges officiate?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If NO, what changes were made and what reasons were given for the changes?	
Were all judges available at the starting time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the Trial held at the advertised venue?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were hand sanitiser and/or towels, basins, disinfectant and 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



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Were exhibits judges in order where practicable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the Trial 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 (if cards not distributed at vetting)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was there sufficient space between search areas?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were you present at completion of judging?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Was / were advertised odour (s) used?	<input type="checkbox"/> YES <input type="checkbox"/> NO



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Class, Element and Name of Judge	Number of dogs catalogued in the ring	Time each class started & finished. Were the judges satisfied with the rings, equipment and organisation? If no, please have judges comment. Please have judges sign upon completion of judging.
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____
CLASS: ELEMENT: JUDGE:		TIME STARTED: _____ TIME COMPLETED: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: _____

CASUAL VENDORS – ORCHARD HILLS

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



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PROTESTS / COMPLAINTS	
To your knowledge, were there any protests or complaints?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If so, were they in writing and lodged with the appropriate fee with the Affiliate?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you aware of any incident at the test other than above?	<input type="checkbox"/> YES <input type="checkbox"/> NO

SIGNATURE:	DATE:
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The completed application should be forwarded to The Secretary, DOGS NSW, PO 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