

DOGS NSW



APPLICATION TO BE ACCEPTED AS A VARIETY OF GUNDOG TO COMPETE IN RATG

Business Address:

The Bill Spilstead Complex for Canine Affairs

Postal Address:

PO Box 632, St. Marys NSW 1790

Ph: (02) 9834 3022

Website: www.dogsnsw.org.au

Email: info@dogsnsw.org.au

Breed _____

Name of Dog _____

*Microchip No. _____

*Mandatory requirement

Registration No: _____

This application is made in order to comply with Clause 2.2 of the Rules for Conduct of Retrieving Ability Tests for Gundogs, effective from 1 January 2011, which reads:-

Main and Limited Gundogs (including de-sexed Gundogs) and Associate Dogs of a variety accepted by a Member Body as a Gundog shall be permitted to compete in Retrieving Ability Test for Gundogs in all States and/or Territories of Australia.

Name of Registered Owner(s) _____

Membership No: _____

All Owners Signature(s) _____ Date: _____

NOTE: *This application may only be made on behalf of a dog already registered on the Associate Register ANKC Ltd Member Body. In order that you may Trial your dog you **MUST** be a member of DOGS NSW & reside in NSW.*

Please send the completed application, together with copies of other relevant documentation as required to The Secretary, DOGS NSW, PO Box 632, ST MARYS NSW 1790.

DOCUMENTATION REQUIRED

The following documentation will be required:-

1. Membership application for Dogs NSW (or quote current membership details)
2. Application for registration on Associate Register (or quote current registration number)
3. An inspection by 3 Gundog (Specialist) Judges** with 5 years standing be required to assess the dog as being a Gundog of the necessary type and, if passed, the dog be accepted for registration on the Associate Register for the purpose of entering RATG events.
(*Each of the 3 Gundog (Specialist) Judges is to complete the Declaration below prior to the application being submitted to the Office.)

NB: The dog named in this application must be registered on the ANKC National Database as an Associate Dog prior to/ or accompanying this application. Original AR Certificate must accompany this application as a new AR Certificate will be issued which indicates the dog is an Associate Gundog.

DECLARATION

We, the undersigned, have assessed the dog as identified on this application and certify that the dog is eligible to be registered as an Associate Gundog.

NAME SIGNATURE DATE

NAME SIGNATURE DATE

NAME SIGNATURE DATE

CREDIT CARD DETAILS

Mastercard Visa

Card Number Expiry Date: _____ / _____

* CCV: _____

Please debit my credit card for the amount of \$ _____ Signature: _____