DOGS NSW CHAMPIONSHIP OR AWARD



Business Address:

The Bill Spilstead Complex for Canine Affairs 44 Luddenham Rd, Orchard Hills NSW 2748

Postal Address:

PO Box 632, St. Marys NSW 1790

Ph: (02) 9834 3022 Website: www.dogsnsw.org.au Email: info@dogsnsw.org.au

This application must be accompanied by a list of all Challenge Certificates/Awards along with the **ORIGINAL** Certificate of Registration & Pedigree **MUST** also be submitted with this application.

| SASH | DUPLICATE TITLE CERTIFICATE |
|---|-----------------------------|
| COLLECT FROM DOGS NSW OFFICE | POST (Tracking Included) |
| 1 HOUR EXPRESS | EXPRESS POST |
| (Select either Collect or Post above, See Scale of Charges for all fees | applicable) |

| BREED: | SEX: |
|--|--|
| NAME OF DOG: | REG.No. |
| NAME OF REGISTERED OWNER/S | |
| ADDRESS: | |
| SUBURB: | POST CODE: |
| CONTACT NUMBER: | DOGS NSW MEMBERSHIP No. |
| EMAIL: | |
| | |
| Please complete the Breeder's name and address | below and a Breeder's Certificate will be sent direct. |
| BREEDERS NAME: | |

Mr/Mrs/Ms/Miss/Other

BREEDER'S ADDRESS:

SUBURB:

POST CODE:

Indicate below the full title/award that you are applying for (including level if applicable)

TITLE/AWARD:

For list of available Titles and Awards and if sashes are available, please view the link on the DOGS NSW Website https://www.dogsnsw.org.au/members/forms/awards-and-titles/

| Credit Card Details | Mastercard 🗌 Visa | Expiry Date: | _/ | CCV No: |
|---|----------------------|--------------|----|---------|
| Card Number | | | | |
| Please debit my credit card | for the amount of \$ | | | |
| Signature of cardholder: _ | | | | |
| The completed application should be forwarded to: 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

| IMPORTANT: |
|--|
| Details of Challenge/Qualifying Certificates gained must be listed below:- |

| DATE | AFFILIATE NAME | JUDGE | POINTS/ QUALIFICATIONS | OFFICE USE ONLY |
|------|----------------|-------|---------------------------|-----------------------|
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I/We declare the details are correct and in accordance with challenge/qualifying certificates now in my/our possession.

<u>ALL</u> owners MUST be financial members of DOGS NSW or a financial member of an ANKC Ltd Member Body and must sign below.

All Owners Signature(s)

PLEASE NOTE: A dog is not eligible to be awarded any ANKC Ltd Title, unless at the time of application and at the time the dog attained the above listed awards, ALL registered owners are financial members of DOGS NSW or any ANKC Ltd Member Body.





_ Date: _

CHAMPIONSHIP OR AWARD APPLICATION CHECKLIST

Business Address:

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Ph: (02) 9834 3022 Website: www.dogsnsw.org.au Email: info@dogsnsw.org.au

| The following check list is to be completed to ensure your application is correct and contains all documents |
|--|
| required when submitting to the office. |

ALL owners **MUST** be financial members of DOGS NSW or a financial member of an ANKC Ltd Member Body
The **ORIGINAL** Certificate of Registration & Pedigree **MUST** be submitted with this application
Are all Challenge/Qualifying certificates clearly listed on the back of the application?
Have you listed the Titles being applied for on the first page of the application?
Have all registered owners signed the second page of the application?
I/We being the registered owner(s) of the dog hereby declare that we have provided all information listed on the

checklist to ensure our application can be processed.

All Owners' Signature(s)

Date____