



JUDGE APPLICATION

You may apply as judge for multiple levels; however, you should apply for only the level(s) for which you are qualified based on ability and experience. If ONLY applying for higher levels, you must currently be an approved or provisional judge at the prior level.

APPLICANT INFORMATION *(Please type or print.)*

Name: _____ Email Address: _____

Address: _____ I am at least 21 years old

City, State: _____ **Check Level(s) applying for below:**

Postal Code: _____ Country: _____ Level 1 (\$50.00) Level 2 (\$50.00) Level 3 (\$50.00)

Day Phone: (_____) _____ - _____ Levels 1 & 2 (\$100.00) Levels 2 & 3 (\$100.00) All 3 Lev (\$150.00)

QUALIFICATIONS *(You must meet at least ONE of the following qualifications; please check all that apply.)*

- I am currently an approved or provisional WCRL judge. Indicate Level(s): _____
- I am currently an approved judge for another form of Rally or another dog sport. Indicate organization(s) and level(s) approved for: _____
- I have earned WCRL/APDT Rally titles with at least one dog. WCRL Dog Registration: _____
Indicate the highest title earned in WCRL/APDT Rally: _____
- I have earned titles in another form of Rally. Indicate organization(s) and highest level earned: _____
- I have at least 40 hours of training experience as an instructor, paid or volunteer, in the previous 12 months.
- I have satisfactorily apprenticed in Level 1 at two licensed WCRL trials; Apprentice Judge Evaluations have been submitted.

EXPERIENCE

Please explain the depth of your experience [as indicated in the qualification(s) checked above] that speaks to your abilities to be an effective judge for **each level** for which you are applying. **Cweej "c" separate sheet if necessary.* _____

REFERENCES

Provide the contact information of two persons willing to attest to your suitability as a WCRL judge for the level(s) for which you are applying. Below, please list each reference's name, email, phone number, and how each person knows you.

NAME	EMAIL	PHONE
1.		
How person knows you:		
2.		
How person knows you:		

JUDGE APPLICATION FORM - CONTINUED

FORM OF PAYMENT:

Manual Check or Money Order (payable to World Cynosport Rally Limited)

ACH/Electronic Check (fill out the following information)

Name on Account: _____ Bank Name: _____

Bank Account #: _____ (6 to 16 digits) Bank Routing #: _____ (Exactly 9 digits)

Account Type: Commercial Checking Personal Checking Commercial Savings Personal Savings

TOTAL APPLICATION FEE: \$ _____

I HEREBY AUTHORIZE WORLD CYNOSPORT RALLY LIMITED (WCRL) TO DRAW FUNDS THROUGH THE AUTOMATED CLEARING HOUSE FROM MY BANK ACCOUNT AS IDENTIFIED ABOVE IN THE AMOUNT SPECIFIED. I FURTHER AUTHORIZE WCRL TO CORRECT THE AMOUNT SHOWN ABOVE FOR ANY ARITHMETIC ERROR ON THIS APPLICATION AND AUTHORIZE SUCH ADDITIONAL OR LESSER CHARGES TO BE SIMILARLY DEBITED OR CREDITED, RESPECTIVELY, FROM MY ACCOUNT.

Authorized Signature on Account: _____ Date: _____

Credit Card Name shown on card: _____ VISA MasterCard Discover AmEx

Card #: | _____ | _____ | _____ | _____ | Exp. Date: ____ / ____ Billing Postal Code: | _____ |

Total Application Fees: \$ _____

Processing Fee (4% or \$3.00, whichever is greater): + _____

TOTAL AMOUNT TO BE CHARGED: \$ _____

MC VISA DISC 3-digit security # on back of card _____ AMEX 4-digit security # on front of card _____

I HEREBY AUTHORIZE WORLD CYNOSPORT RALLY LIMITED (WCRL) TO INITIATE CHARGES TO MY CREDIT CARD ACCOUNT PROVIDED ABOVE UTILIZING THE INFORMATION PRESENTED HEREIN. I FURTHER AUTHORIZE WCRL TO CORRECT THE AMOUNT SHOWN FOR ANY ARITHMETIC ERROR ON THIS APPLICATION AND AUTHORIZE SUCH ADDITIONAL OR LESSER CHARGES TO BE SIMILARLY CHARGED OR DEBITED.

Credit Card Authorized Signature: _____ Date: _____

GENERAL AGREEMENT

THROUGH SUBMISSION OF THIS APPLICATION, I UNDERSTAND THAT WCRL HAS NO OBLIGATION TO APPROVE ME AS A JUDGE. DETERMINATION OF SUCH STANDING SHALL BE BASED SOLELY ON WCRL'S EVALUATION AND SUBSEQUENT REVIEW OF MY ABILITY, KNOWLEDGE, CHARACTER, PROFESSIONALISM, OR FOR ANY OTHER REASON DEEMED BY THEM TO BE SUFFICIENT. IN THE EVENT OF NON-APPROVAL, THERE SHALL BE NO REFUNDS OF FEES PAID FOR THIS APPLICATION. I UNDERSTAND THAT I WILL BE CHARGED \$35.00 FOR ANY DENIAL OF PAYMENT.

Applicant Signature: _____ Date: _____

General Agreement above must be signed.

**Fee must accompany application and is payable in U.S. Dollars to:
WCRL, P.O. Box 850955, Richardson, TX 75085-0955, USA.
Fax application with ACH or credit card info to (1)(972) 231-9700.**