

DOGS QUEENSLAND

PO BOX 1136, MT OMMANEY QLD 4074
PHONE (07) 3252 2661, FAX (07) 3252 3864



Email: info@dogsqueensland.org.au, Website: www.dogsqueensland.org.au

R10 – FIXTURE REPORT AND SURCHARGE FORM
EARTHDOG TESTS

.....
(Name of affiliate conducting test)

Date of Fixture: ____ / ____ / 20 ____

Type of FIXTURE:

EARTHDOG TEST

<i>Classes</i>	<i>Name of Judge</i>	<i>No. of dogs entered</i>
<u>INTRODUCTION TO QUARRY</u>
<u>NOVICE EARTHDOG</u>
<u>SENIOR EARTHDOG</u>
<u>MASTER EARTHDOG</u>
<u>TOTAL ENTRIES</u>	

This form is to be forwarded to the Dogs Queensland Office, **WITHIN FOURTEEN (14) DAYS OF THE TRIAL DATE**, accompanied by a **MARKED CATALOGUE** and **ADMINISTRATION PAYMENT**.

ADMINISTRATION FEE:

TOTAL No. OF ENTRIES	.....	@	\$ .....	PER ENTRY
	.....	@	\$ .....	PER ENTRY
	.....	@	\$ .....	PER ENTRY
	.....	@	\$ .....	PER ENTRY
	.....	@	\$ .....	PER ENTRY

TOTAL \$

ADMINISTRATION FEE: 10% OF TOTAL ENTRY FEES \$

GROUND LEVY..... @ \$3.30 PER ENTRY \$

TOTAL PAYABLE \$ (+ 10% GST)

Signed: (Secretary) Date: ____ / ____ / 20 ____ Phone:

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CREDIT CARD PAYMENT DETAILS

NAME: _____

MASTERCARD

VISA

(tick one box)

CARD NUMBER: _____ - _____ - _____ - _____ EXPIRY DATE: ____ - ____

AMOUNT \$ _____

CARDHOLDER'S PHONE NUMBER:

CARDHOLDER SIGNATURE _____ Date ____ / ____ / 20____