



# THE IRISH KENNEL CLUB

GADHARCHUMANN NA hÉIREANN

Fottrell House, Harolds Cross Bridge, Dublin 6 W.

Tel: Show Dept. 4533 023

Tel: (01) 4533300/ 4532309 14532310. Fax: (0 1) 4533237

E-mail: info@ikc.ie website: www.ikc.ie



## Contract for Overseas Judge

Name of Show: \_\_\_\_\_

Date of Show: \_\_\_\_\_ Show Type: \_\_\_\_\_

Name of Judge: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Kennel Authority: \_\_\_\_\_ Licence Number: \_\_\_\_\_

Permission Required: Yes  No

Breed(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Stakes Classes: \_\_\_\_\_

Group(s): \_\_\_\_\_ Best in Show: Yes  No  Junior Handling: Yes  No

Travel arrangements will be made by: Society  Judge  (if booking ourself,  
it must be cheapest apex fare available)

**If due to illness or other circumstances a judge cannot fulfil the above appointment the show organiser must be notified immediately by phone & email**

### DECLARATION

- (i) I the undersigned declare that I am qualified to judge the Breed(s)/ Group(s)/ Best in Show listed above.
- (ii) I declare I will familiarise myself with the standards of the breed(s) relevant to this appointment, as recognised by the F.C.I./ Irish Kennel Club.
- (iii) I also undertake, not to judge any Breed listed above, under Irish Kennel Club rules, within a Twenty-Four (24) month period, or Group(s)/Best in Show within a Twelve (12) month period.

### Health & Welfare Commitment

I agree to:

- Undertake to view the Irish Kennel Club Health Video ----- [Health Video](#)
- Complete Breed Specific Instructions (BSI) forms and return the fully completed forms to the Secretary

Judge: \_\_\_\_\_ Date: \_\_\_\_\_

Show Secretary: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Address of Secretary: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_