

**Judges Application Form**

*We welcome and encourage all new applications from those with an extensive level of showing knowledge and experience to those who have a passion and interest in Concours d’Elegance.*

Name…………………………………………………………………………………………………….

Address…………………………………………………………………………………………………...…………………………………………………………………………………………………………...………………………………………………………………………………. Postcode………………...

Home phone number……………………………………. Mobile………………………………………

Email Address………………………………………………………………………………………………………

Occupation…………………………………………………………. DOB………………………………………...

Equine Experience

Do you have your own horses: Yes/No How Many…………………………………………………....................

What other Judges cards do you hold……………………………………………………………………………….

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What Shows have you Judged at in the last six months…………………………………………………………….

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WHY DO YOU WISH TO BECOME A CDSGB JUDGE: Indicate your experience within the equine world as an exhibitor/judge/seminars/clinic attended within last 12 month:

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You may use a separate sheet to list/detail any further information required above or to detail anything else you feel may be of interest to the CDSGB in respect of this Application.

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE JUDGES CO-ORDINATOR.**

I, the undersigned, affirm that the information provided on this application form is true and complete to the best of my knowledge. I have read and understand the current CDSGB Rule Book and that such rules as set forth in the CDSGB Rule Book are applicable to me at all times as a probationary or approved CDSGB Judge. I also acknowledge that designation as a CDSGB approved Judge is a privilege not a right bestowed by the CDSGB and my application may be denied. Terms and conditions of your application Once you have been invited onto the panel, we will hold your information within our system for an indefinite period, as a judge Membership. Paperwork will only be held for 2 years if not renewed or additional information be added. Your contact information will be available on our website and this will appear as your email or contact telephone number, no address maybe given only the county.

Please tick this box, to confirm that you are happy that the CDSGB may contact you in regard to judge’s appointments and Shows in the future and that you have read and understand the terms and conditions.

Please tick this box to confirm you are happy your details are shared with 'Showing World' to receive your free magazine as part of your judging membership.

THIS FORM IS TO BE COMPETED AND RETURNED TOGETHER WITH TWO REFERENCES (including email contact and phone number) AND A CV OF YOUR EQUINE EXPERIENCENCE.

Signed…………………………………………………………………………… Date………………………………………………………

Please Return completed form to: Ms Natalie Hudson, CDSEGB Judges Coordinator, 10, Swift Close, The Pastures, Hornsea, East Riding of Yorkshire, HU18 1LD or email: nataliehudson977@gamil.com