

TRIAL JUDGE APPLICATION FOR ASSESSMENT

Name:..... M/Ship Number:.....

Address:.....

Last Judging School Location & Date :.....

Judging History: *(Please List a Minimum of Five – NOT including Encouragement, Junior or Juvenile events).*

	DATE	LOCATION	EVENT
1			
2			
3			
4			
5			
6			
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8			
9			
10			

- I believe the above applicant ready to be assessed to become an Accredited OPEN Judge of the Southern Campdraft Association.
- I am a current financial member and also a current accredited Open Judge of the SCA.

Nominated *(Current SCA OPEN Judge)*:..... M/Ship Number:

Signature: Date:

Seconded *(Current SCA OPEN Judge)*:..... M/Ship Number:

Signature: Date:

- I wish to be assessed to become an accredited Open Judge of the Southern Campdrafting Association.
- I am a current financial member of the Southern Campdrafting Association.
- I consent to my email address being stored and used by the Judges Panel to contact me regarding judging matters.

Signature of Applicant:

Email address:

Phone:

Date: