



# AMATEUR FIELD TRIAL CLUBS OF AMERICA

## Application for Reinstatement of Amateur Status

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I hereby apply for reinstatement as an amateur handler. I have not received, either directly or indirectly, compensation for training or handling dogs for a period of 3 years.**

Last date as a professional: \_\_\_\_\_

Comments about history  
as professional: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

### Attestment of 2 AFTCA Trustees

1. Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Region: \_\_\_\_\_ Signature: \_\_\_\_\_

2. Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Region: \_\_\_\_\_ Signature: \_\_\_\_\_

Regional Trustee Approval Date: \_\_\_\_\_ Region: \_\_\_\_\_