



AUSTRALIAN
FLYBALL
ASSOCIATION

Height Card Application Form

All sections must be completed in accordance with section 8.3 and Appendix 11 of the Rules, together with height card fee (\$15) paid to AFA on submission of the form.

Dog Name: _____ CRN: _____

Owner Name: _____ CRN: _____

New Card: ☐ Replacement Card: ☐

Measurement 1:

Date: _____ Race Meeting: _____

Ulna measure: Left _____ inches Right _____ inches

Dog Jump Height (lower of the Left and Right): _____ inches

Judge Name: _____ Signature: _____ CRN: _____

Witness Name: _____ Signature: _____ CRN: _____

Witness Capacity: Judge/Registered AFA Rep/Registered Timekeeper (circle one)

Owner Signature: _____

Measurement 2:

Date: _____ Race Meeting: _____

Ulna measure: Left _____ inches Right _____ inches

Dog Jump Height (lower of the Left and Right): _____ inches

Judge Name: _____ Signature: _____ CRN: _____

Witness Name: _____ Signature: _____ CRN: _____

Witness Capacity: Judge/Registered AFA Rep/Registered Timekeeper (circle one)

Owner Signature: _____

NOTE: The Judge and the Witness involved in Measurement 1 cannot undertake the measure or witness the measure for the second measurement. There must four different officials involved over the two measurements.

AFA use only:

Height Verified: Yes / No

Date Issued: ____/____/____

Receipt #: