**QUEENSLAND CAVY COUNCIL**

**CHAMPIONSHIP CERTIFICATION ~ POINTS CLAIM FORM**

**Name of Claimant**:

**Breeding Prefix**:

**e-mail address**:

**Postal Address**:

**Name of Cavy** *(please include Breeders Prefix)*:

**Breed**:

**Colour**:

**Payment**:

**FEES MUST ACCOMPANY THIS CLAIM FORM OR HAVE BEEN DIRECT DEPOSITED INTO THE QCC ACCOUNT PRIOR TO SUBMISSION OF THIS FORM**

**FEE = $10.00** *(covers the cost of the Certificate, Printing and Postage & Packaging)*

**DIRECT DEPOSIT INFORMATION**

**Direct Deposit Receipt No**:

**Name of Account:** **QUEENSLAND CAVY COUNCIL**

**BSB**: **124 001**

**Account Number**: **21427652**

**When Direct Depositing Please Use Your Stud Name and ‘Champ’ for the Message/Reference e.g. HEDONCHAMP**

**PLEASE MAKE ALL CHEQUES AND MONEY ORDERS PAYABLE TO:**

**QUEENSLAND CAVY COUNCIL**

**CHAMPIONSHIP LEVEL BEING CLAIMED** *(CHECK ONLY ONE BOX)*

**[ ]  CHAMPION** **[ ]  DOUBLE CHAMPION** **[ ]  GRAND CHAMPION**

**ONLY ONE LEVEL AT A TIME CAN BE CLAIMED ON THIS FORM**

|  |  |  |
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| **Type of Points Claimed***i.e. Best of Breed, Best in Group, Reserve in Show or Best in Show* | **Show***e.g. State Titles/National or Club Show* | **Month/Year** |
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