



Judges Registration Australian Culinary Federation

Name of Judge

Address:

Date of birth:

Telephone Contact Numbers:

Emergency Contact:

State Representing:

Signature: Date:

Registered from..... Training Completed On.....

State President Verification..... Trained By Whom.....

Judging To Date (Please include level of Judge / Time Spent Judging (Days))

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-----Culinary Committee-----

Level of Judge.....

Date.....

Approved By.....

Requirements for Future.....

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Copy to: State President / National President / Rick Stephen