

The International *Cal* Association Request for Exhibitor Mentor

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Applicant must be Exhibitor Program (<u>http:/</u>	18 years ol //tica.org/cat-l				you	are	younger,		ase look Date: _	د at	the	Junior
Contact Information												
First Name:				Las	st Nan	ne:						
Email Address:												
Check here if this						ess:						
Applicant Informatio												
Check here if nam	ne and email ad	ldress are	e the same as	above	э.							
First Name:				Las	st Nan	ne:						
Email Address:												
Address:												
City:					Stat	te:		Pr	ostal Co	de:		
Country:					Phor	ne:						
Experience												
Do you own a cat you would like to show?		Yes			1	No						
If yes, is the cat a:		Purebre	Purebred		ł	Household Pet						
If the cat is a purebred, w												
Do you have interest in any other breeds?		Yes			ſ	No						
Breed(s) of interest:												
Have you previous experience in showing/breeding cats or other animals? Yes No												
If yes, please elaborate.												



TICA and Showing Information	on				
Are you a TICA member?	Yes	No			
Do you know your TICA region?	Yes	No	Region:		
Have you attended a cat show as a spectator previously?			Yes	No	
If yes, in what association?	TICA	CFA	ACFA	I don't know	
How often do you hope to show your cat(s)?		Once a month		Every 6 months	Once a year
		l don't know			

Your Comments

What are your expectations of a mentor?

Do you have any additional comments you'd like to share with the committee?

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from the mentor program.

Name (printed):	
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Signature:

Date:

Our Policy

Thank you for completing this application form and for your interest in finding a mentor. Notifications are made by your Regional Contact as soon as possible.