

**Scent Theory Workshop**

**REGISTRATION FORM**

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

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

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

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

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**Emergency Contacts:**

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

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

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

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Limited Entry of 5 Dog teams per workshop on a first come first serve bases.

Limited Entry as an Auditor 20 per workshop.

Check One: Dog/Handler slot \_\_\_\_\_ Auditor: \_\_\_\_\_

If the working slots are full would you be interested in auditing Yes \_\_\_\_ No \_\_\_\_

AKC Certification Testing Friday \_\_\_\_\_ Sunday \_\_\_\_\_

\* \$100.00 non-refundable Deposit is required to hold your spot for the Dog/Handler slots.

\* \$50.00 non-refundable Deposit for the Auditors slot.

Paid Deposit: \_\_\_\_\_ Date: \_\_\_\_\_

Full Payment is due by Saturday, February 24, 2007.

Paid in Full: \_\_\_\_\_ Date: \_\_\_\_\_