*JESSICA NEWCOMB WORKSHOP REGISTRATION FORM*

***Workshop attending:***

*Beginner heeling Sat 10/28 10-12:30 (circle one) Working Audit*

*Advanced heeling Sat 10/28 1:30-4(circle one) Working Audit*

*Attention games Sun 10/29 10-12:30 (circle one) Working Audit*

*Open/Utility Sun 10/29 1:30-4 (circle one) Working Audit*

*Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Member: yes active/ yes inactive/ no*

*Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Dog info:May train more than 1 dog but not in the same block*

*Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Breed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Dog Training at what level?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Classes at IDTC?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

### # working blocks requested\_\_\_\_\_\_\_\_ # audit spots requested\_\_\_\_\_\_\_\_\_\_

*Total Payment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*I will pay by PayPal paper check (to IDTC)*

*PayPal amount send to:*

**Susan Beals** at *ithacadogtrainingclub@gmail.com (*use friends and family option and note that it is for this workshop)

*Registration form can be filled in online and sent to*

**Lynne Anguish** at *lynne.anguish@gmail.com*

*Paper registration form can be filled in with paper checks to*

**Lynne Anguish**

**804 Snyder Hill Rd, Ithaca, NY, 14850**