

Black Hills

NAVHDA



ALL CHAPTER MEMBERS MUST BE MEMBERS OF NAVHDA INTERNATIONAL

PLEASE PRINT

Name _____

NAVHDA Registration Number _____

Spouse/Significant Other _____

Spouse/SO NAVHDA Registration Number _____

Children's Name(s) & Age(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email address _____

Breed(s) of Dog(s) _____

Do you have a kennel or dog-related business? _____

Kennel/business website _____

Do you plan to test this year? NA _____ UTP _____ UT _____

Your training and testing experience _____

Your training needs and goals _____

Memberships: Single (1 vote) \$40.00 Family (2 votes) \$50.00

Please mail completed form and payment to:

Black Hills NAVHDA c/o Barb Gregory 708 W. 9th St. Gillette WY 82716