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| --- | --- |
|  | **HANDLER REGISTRATION**  VIRGINIA POLICE WORK DOG ASSOCIATION  FALL WORKSHOP  October 4th – October 8th, 2021 |

LAST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRST: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI: \_\_\_\_\_\_\_\_

ADDRESS INFORMATION:

|  |  |
| --- | --- |
| **HOME:** | **WORK:** |
| ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_ | ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST:\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_ |

PRIMARY PHONE: (\_\_\_\_\_)\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ PRIMARY PHONE: (\_\_\_\_\_)\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

POSITION HELD: HANDLER (Active Retired) TRAININER (Active Retired)

K9’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BREED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COLOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CURRENTLY A MEMBER IN GOOD STANDING OF:  VPWDA  NAPWDA

CHECK THE FOLLOWING DISCIPLINE(S) YOU ARE CURRENTLY A CERTIFIED MASTER TRAINER IN:

|  |  |  |
| --- | --- | --- |
| UTILITY  CADAVER  BLACK POWDER | NARCOTICS  BLOODHOUND  ACCELERANT | EXPLOSIVES  SAR |

WILL YOU BE ATTENDING THE BANGQUET?  NO  YES: # OF GUESTS \_\_\_\_\_\_ x $25 each

**REGISTRATION FEES:** VPWDA & NAPWDA MEMBER $125 NON-MEMBER $150

**PLEASE MAKE CHECKS PAYABLE TO VPWDA**

PLEASE SEND COMPLETED REGISTRATION FORMS AND CHECKS TO:

VPWDA, c/o MPO Jeff Wright,

Newport News Police Department K-9 Unit

PO Box 1326, Newport News, VA 23601

(757) 897-8330 [*wrightjs@nnva.gov*](mailto:wrightjs@nnva.gov)

ATTENTION: THE BELOW WIVER MUST BE SIGNED & DATED IN ORDER FOR YOU TO PARTICIPATE!!!!!

WAIVER STATEMENT:

I, the team of (handler) \_\_\_\_\_\_\_\_\_\_\_\_ and (K9) \_\_\_\_\_\_\_\_\_\_\_ absolve the Newport News Police Department and any employees or representative thereof, as well as the Virginia Police Work Dog Association, its president, officers, and any members or representative hereof from liability incurred while attending the Virginia Police Work Dog Association Fall Workshop to be held on October 4th-October 8th, 2021, to include acts of God, accident, injury or sickness.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PRINTED NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGENCY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_