K9 Nose Adventures, LLC NACSW™ – Odor Recognition Test

SATURDAY February 1, 2025

Central Baptist Church , 1715 HWY 68, Oak Ridge, NC

Registration Fee \$35/odor - Payment by check. Payable to K9 Nose Adventures, LLC, Mail to 8501 Bethel Ridge Drive, Oak Ridge, NC 27310

Please mail this completed form via USPS with your registration fee to: K9 Nose Adventures, LLC, 8501 Bethel Ridge Drive, Oak Ridge, NC 27310

| Questions: Con | tact: Nancy Osborne | EMAIL nancy | yosborne71@gmail.com | |
|--|--|--|--|-------------------------------------|
| Odor: Birch | □ Anise | □ Clove | | |
| Test date(s): Sa | aturday February 1, 2 | 025 | | |
| Dog's Call Nam | ne | | | |
| Breed(s) | | _ Dog's NAC | CSW # | |
| Handler's Name | e | | | |
| Handler's NAC | SW Membership#_ | | · · · · · · · · · · · · · · · · · · · | |
| Address | | | | |
| City | State _ | | Zip | |
| Phone where y | ou can easily be reac | hed | | |
| E-mail Address | | | | |
| Emergency Co | ntact (Name & Phone | Number): | | - |
| An ORT must be draw period. | e taken and passed at | least 14 days | before a trial opening date to be eligible fo | or the first |
| Please contact y | your host at least 1 da | y before the C | ORT if your female dog will be in season. | |
| | | | t within 7 days of receipt of complete registrati u must provide a self-addressed stamped env | |
| to others, resultir NC and Central E of said groups, sl damage to my pe | ng from the actions of m Baptist Church 1715 HV hall not be held liable pe | y dog. I/We exp VY 68, Oak Rid ersonally, or colo to my property, | accidents and/or damage to myself or to my p pressly agree that K9 Nose Adventures, LLC lge, NC and/or NACSW or any other person, of llectively, under any circumstances, for injury, whether due to uncontrolled dogs or negligen | Oak Ridge, or persons, and/or |
| Signed: | | | Date: | |