

WDDO Training & Testing Seminar

Virginia Beach

Location of event; 2920 Sandfiddler Rd, Virginia Beach, VA 23456

WORKSHOP DECEMBER 5TH, 6TH and 7TH
Testing Available on Dec 7th



Master Trainer;

TRAINING, TESTING, SALES, CONSULTING
(205) 966-8739

530 Hackney St, Lincoln, AL 35096

Alfirek9@aol.com

www.Kipk9.com

One on one training sessions will be conducted by David Latimer with each handler/dog team. Sessions are videoed for review with handlers.

Contact David at alfirek9@aol.com for any questions on training or testing. Also Feel free to contact him about your specific k9 training needs for this event.

Hosting WDDO member; Impressive K9 and Pest, David Engelbert and Stephanie Koch. Testing and seminar will be held at 2920 Sandfiddler Rd, Virginia Beach, VA 23456. Contact Steph at 757-880-6768 or stephanie.impressivebbs@gmail.com for location details or questions.

SPACE MAY BE LIMITED
SIGN UP ASAP TO GET YOUR SPOT
WORKSHOP DECEMBER 5TH, 6TH and 7TH
Testing Available on Dec 7th
(MUST PRE-REGISTER FOR TESTING BY NO LATER THAN NOV 15, 2022)



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REGISTRATION VA BEACH WORKSHOP AND CERTIFICATION TESTING EVENT

WORKSHOP DECEMBER 5TH, 6TH and 7th

Testing Available on Dec 7th

(MUST PRE-REGISTER FOR TESTING BY NO LATER THAN NOV 15, 2022)

One on one training sessions will be conducted by David Latimer with each handler/dog team. Sessions are videoed for review with handlers.

I **WILL** / **WILL NOT** ATTEND THE WORKHOP

I **WILL** / **WILL NOT** TAKE THE CERTIFICATION TEST ON DEC 8TH.
(Proof of WDDO paid membership dues is required to register for the test)

HANDLER NAME _____
(PLEASE FILL OUT A SEPARATE FORM FOR EACH HANDLER/DOG TEAM)

ADDRESS _____

CITY _____ ST _____ ZIP _____

EMPLOYER _____

TARGET ODOR _____

PHONE (____) _____ - _____ CELL (____) _____ - _____

DOG NAME(S) _____

Dog's Microchip #(s) _____

.....
(Only enter credit card info if you plan to attend the workshop)

CC # _____

EXP DATE __ / __ / __ CODE ON BACK OF CARD _____

Price for workshop attendance: \$325

Each Additional Dog with Same Handler \$165

Total Amt to bill to Card \$ _____ Pd by Check / Cash

SIGNATURE _____