

NAVHDA



ILLINOIS

CHAPTER

NORTH AMERICAN VERSATILE HUNTING DOG ASSOCIATION

Dues - \$25.00 Per Calendar Year

Name: _____

Phone: _____

Address: _____

City: _____ State: _____

Zip: _____

E-Mail: _____ Cell

Phone: _____

Breed(s): _____ # Of Dogs: _____

Names: _____

Testing

Experience: _____

Training

Experience: _____

Comments: _____

Year: _____ New Member: _____ Renewal: _____

Make Checks Payable To: ILLINOIS NAVHDA
Mail To: Gene Wolf 16817 Creekside Ave. Tinley Park, IL. 60477

ILLINOIS CHAPTER NAVHDA TRAINING NEEDS

In an effort to better serve our members we are asking each of you to fill out this form for **each dog** you would like to have participate in NAVHDA Training Programs.

_____/_____
Chapter Member

Dogs Call Name/Age

I am interested in participating in the NAVHDA Testing Programs ___/___ N/A
___ Utility___

Yes / No

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I will plan on testing my dog in **Natural Ability** during the Spring ___ Fall ___
Year _____

I will primarily need help in the following areas:

Introduction to Birds ___ Pointing ___ Tracking ___ Water Work ___ Retrieving ___

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I will plan on testing my dog in **Prep_ / Utility_** during the Spring ___ Fall ___
Year _____

I will primarily need help in the following areas:

Pointing ___ Steadiness ___ Drags ___ Duck Search ___ Steady at Blind ___
Heeling ___

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I am interested only in developing my dog as a hunting companion and would like help in these areas.

PUPPIES: Obedience___ Intro to Birds___ Retrieving___ Water ___

ADULTS: Obedience___ Pointing___ Steadiness___ Retrieving___ Honoring___
Water___

Other Areas of Interest

I can offer the following services or capabilities to help the Chapter and its Members _____

Return Completed Form to: **Lark Frederiksen, 4610 W. Gardner Rd., Verona, IL 60479**

