



NCTD Training/Evaluation Registration Form

The best and easiest way to register for NCTD classes and evaluations is online at www.nctdinc.org. However if you prefer to pay by check, please complete this form manually and mail it to us at the address on page 2.

Name: _____
(If under 18 years old, please specify age)

Address: _____

Phone: Home: _____ Mobile: _____

E-Mail: _____

Quantity	Event	Date	Cost	Totals
	NCTD Handler/ Volunteer Training		\$70 per person	\$
	NCTD Therapy Dog Training Class		\$100 per animal	\$
	NCTD Team Evaluation		\$20 per team	\$
			Total Cost *	\$

** For accounting purposes, please send a separate check for each activity.
All Fees are non-refundable*

(Continued on next page)



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If you are registering for either the Therapy Dog Training Course or the Team Evaluation, please complete the following for each animal:

Animal's Name: _____ Date of Birth: _____

Type/Breed: _____ Gender: _____

Intact or Altered? _____

I understand that I assume all responsibility of any and all actions of my animal. I also understand that NCTD is not liable for the action of any other animal in the class.

Signature: _____ Date: _____

Send us:

- The completed signed form;
- The check(s), payable to NCTD;
- A copy of a current rabies certificate *for each animal*; and
- A copy of the AKC CGC certificate *for each animal*.

Mail to:

Jack Quarantillo
Registrar
National Capital Therapy Dogs, Inc.
9514 Dunbrook Court
Montgomery Village MD 20886