Sea Change Canine LLC, NACSW ™- Odor Recognition Test (ORT) Sunday January 21,2024
Handler NACSW Membership number
Handler Name
Flrst
Last
Email . Please print clearly.
Phone where you can be easily reached up til and on the day of event
Dog NACSW Registration Number
Dog Call Name
Dog Breed
Odor(s) Tested (\$30.00 <b>Per Odor</b> tested) Do not include any FEO tests here. Check off what odor(s) apply
Birch
Anise
Clove
An ORT must be taken and passed at least 14 days before a trial opening date to be eligible for the first draw.
Please contact us at least 1 day before the ORT if your female dog will be in season.
All confirmations will be sent via e mail.
continue:

## For Exhibit Only (FEO) registration will open on the date listed on the premium if space is available.

For Exhibit Only Dogs (FEO): Dogs running FEO are not eligible to receive titles. FEO results will not be included in the posted ORT results. If space remains after all qualified entries are accommodated on the date listed in the premium, then we will offer spaces for those who wish to run a dog FEO. Second dog/handler FEO entries on the same day will be offered spaces after the date listed in the premium. Dogs may only run FEO in odors that they are not alredy registered for. Dogs running FEO are using this test as practice and are not eligible to receive a title.

Please check which tests you would like to run FEO. Please Note- DO NOT send payment for any FEO tests until you are contacted by the host. We can only offer FEO spaces if we have room after the date in the premium.			
Birch	Anise	Clove	
I understand that participating in a Nose Work trial or Odor Recognition Test (the "Event"), whether as a participant, a volunteer or a spectator, holds some risk. These risks include, but are not limited to, that the behavior of dogs and other domestic animals is sometimes unpredictable, cannot be guaranteed, and can result in serious personal injury or death to bystanders, as well as extensive property damage. In addition, I and/or my dog may be exposed to challenging, treacherous or unstable terrain and footing during the Event.			
I Agree			
of detection style action that I may of National Associati Rachelle Bailey-Aremployees, officer any claim or cause arising out of or in to the extent that Released Party. If from and against a connection with a	training or competite therwise have again on of Canine Scent ustin, About Face Krs, directors, agents of action for personate Claim arises out the Claim arises out any and all claims, on Claim that is basen.	risks associated with participating or observing any type ion. I hereby waive and release any claim or cause of nst Amy Herot, Jill-Marie O'Brien, K9 Nose Work®, Work, LLC®, Dorothy Turley, Let's Talk Dogs, LLC, -9 Academy, The Rants Group, and their respective of or contractors (collectively, the "Released Parties") for onal injury or property damage (collectively, a "Claim") rents, accidents or other occurrences at the Event, except of the intentional misconduct or gross negligence of the end, indemnify, and hold harmless each Released Party damages, costs and expenses arising out of or in sed, in whole or in part, on acts or omissions by me or by which I have or had responsibility or control.	
I Agree			

I represent and affirm that to the best of my knowledge and belief: (1) I do not have COVID-19 nor am I waiting for test results; (2) I have not been tested and found positive for COVID-19 or if I have tested positive for COVID-19, I certify that I have been released by government officials and/or health care providers to resume normal activity without limit; (3) If I have experienced symptoms associated with COVID-19 including fever, coughing, or shortness of breath or if I have been in contact with or exposed to any known carrier of COVID-19, I have met the current CDC recommendations regarding testing and/or quarantine.

I am representing my condition as of signing, and if, as of the later time of the event, there has been any change in any of the conditions represented, I am obligated to formally notify the event host of the changed conditions at the time of and before participating in the event. I agree to follow any specific event guidelines, precautions and requirements to mitigate the possibility of event participants or attendees contracting or spreading COVID-19. I understand the risks of contracting or being exposed to COVID-19 associated with my attendance at this event, and I knowingly accept those risks. I agree to waive, release and hold harmless all Released Parties from and against any claim, liability, loss or expense arising from or based upon a COVID-19 infection acquired by myself or any of my family members or associates as a result of or contemporaneous with attendance or participation at this event.

Participation in NACSW events requires adherence to all host, facility, and jurisdictional guidelines and requirements relating to COVID-19. This may include testing, vaccinations, quarantines, temperature checks and other safety measures.

I Agree	
Name of dogs at the event location:	
Signature below verifies I have read, und	derstand and agree to the above.
	Date
Print Name	
Parental Consent (only required if you a	re the parent of the person above who is a minor)
that I have read and understant this Lial	guardian of the above named minor. I acknowledge bit Waiver and that I and the above named Monor will ature below verifies I have read, understand and agree
Parent Signature	Date
\$30 Per Odor - TOTAL \$ form of a check made out to Sea Chang 2024)	(registration after Jan 12, 2024- Payment in the ge Canine, is due in full, the day of ORT. January 21st,