

Handler Information

Fill in all blanks

Name _____ Age _____

Department _____

Full Time Officer _____ Special Officer _____ Other _____

Describe your position with the bloodhound at this department _____

Mobile Phone _____ Work Phone _____

How long have you been handling hounds? _____

Number of hounds trained? _____

List any other types of K9 experience _____

Types of calls within the past year:

___ Escapes ___ Lost Persons ___ Criminal Calls ___ Runaways

Types of criminal cases within the past year:

___ Murder ___ Rape ___ Armed Robbery ___ Stolen Vehicle ___ B&E Vehicle

List any other cases: _____

Briefly describe the terrain you normally work: _____

Describe (on additional sheet if needed) any experience you have in bloodhound handler testimony in the courtroom: _____

List previous seminars and instructors _____

Please complete and return this form with your registration form and payment.

Hound Information

Please fill out completely

Hound's name _____

Age: _____ Sex: _____ Age training started _____

Is hound spayed or altered? _____

Age of trail normally run: _____

Approximate number of hours per month in training: _____

Does hound have experience with pool scent? _____

Do you use scent article and/or known locations? _____

Does hound make an ID that you can easily recognize? _____

When do you normally train? _____ Night _____ Daylight _____ Both

List any problems with this hound or training that you want to work on during the seminar:

Additional Comments (if any):

Please complete and return this form with your registration form and payment.

Registration Form

Fill out form completely and legibly

Handler Name _____

Mobile (WORK) Phone _____

Work Email _____

Agency Name _____

Agency Address _____

Agency Phone _____

Check Amount: \$ _____ (\$375.00 per attendee) Check Number: _____

Name of Person for Credit Card holder/ Authorization _____

Credit Card Holder's email Address _____

Credit Card holder's Phone# _____

Will you be attending the Scent Class on Sunday? Yes No

(first time attendees must attend the Sunday Scent Class)

Shirt Size: S M L XL XXL

(First shirt is complimentary...extra shirts are \$16.00 each – please include payment for any extra shirts along with registration payment)

Please submit the registration form, handler and hound information, and registration payment together (deadline is November 1st or when the roster is full, so please get these items turned in as soon as possible).

If paying by Credit card E-MAIL completed packet to:

Travis.Shealey@yorkcountygov.com

If paying by check Mail packet to:

York County Sheriff's Office – K9 Unit

Attention: Cpl. Travis Shealey, Cpl. Patrick Ashford, or Sgt. Chris Kinsey

1675-2A York Highway

York, SC 29745

Seminar will be held in the Kings Mountain State Park which is located off of Highway 161, just south of the North Carolina state line (1299 Camp Cherokee Road, Blacksburg, SC 29702)