Kathy Collins

NACSW™ – Odor Recognition Test

Saturday, August 29, 2026

Murfreesboro Obedience Training Club, 1519 Sarah Court, Murfreesboro, TN 37129

$40.00 per test registration fee. Payment options:

-- Check or money order, made out to Kathleen Collins

-- Zelle to re3verz@gmail.com

-- Venmo to @Kathy-Collins-85

If paying by check, please mail this completed form via USPS with your check or money order to: Kathy Collins, 725 Aberdeen Parke Drive, Smyrna, TN 37167.

If paying electronically, please check the appropriate option below; then scan or take a photo of the completed application form and email it to me at re3verz@gmail.com.

Paid with Zelle___ Paid with Venmo___

Questions: Contact Kathy Collins re3verz@gmail.com

Odor: □ Birch □ Anise □ Clove

Test date: Saturday, August 29, 2026

Dog's Call Name _____

Breed(s) _____ **Dog's** NACSW #_____

Handler's Name _____

Handler's NACSW Membership # _____

Address _____

City _____ State _____ Zip_____

Phone where you can easily be reached _____

E-mail Address _____

Emergency Contact (Name & Phone Number):_____

An ORT must be taken and passed at least 14 days before a trial opening date to be eligible for the first draw period.

Please contact your host at least 1 day before the ORT if your female dog will be in season.

All confirmations will be sent via e-mail with attachment within 7 days of receipt of complete registration form and payment. If you require confirmation via USPS, you must provide a self-addressed stamped envelope.

I/We hereby assume all risks of, and responsibility for, accidents and/or damage to myself or to my property or to others, resulting from the actions of my dog. I/We expressly agree that Kathy Collins, and/or NACSW or any other person, or persons, of said groups, shall not be held liable personally, or collectively, under any circumstances, for injury, and/or damage to my person, for loss or injury to my property, whether due to uncontrolled dogs or negligence of any member of said groups, or any other cause, or causes.

Signed: _____ Date: _____

Revised 1//26/26