

CHENNY TROUPE TEST RESERVATION FORM

_____ Please reserve a space for me at the practice and testing sessions on _____
_____ (please check the home page to select the dates) beginning
promptly at 9:30 AM. (The Chenny Troupe staff will advise you of the location of the test
when we receive your reservation).

NAME _____

DOG'S NAME _____

DOG'S BREED AND AGE _____

ADDRESS _____

TELEPHONE _____

E-MAIL _____

Please sign and date:

I understand that attendance at **both** sessions is mandatory to complete the certification process.

To the best of my knowledge, my dog _____ (dog's name) is not aggressive toward humans or other dogs.

I have received and reviewed the Chenny Troupe Therapy Dog Test, and understand that the test is a pass/fail test.

Signature and Date

PLEASE RETURN THIS FORM AND \$35 CHECK MADE PAYABLE TO CHENNY TROUPE TO:

Caryl Horn
Associate Director
Chenny Troupe, Inc.
1700 W. Irving Park Road
Suite 311
Chicago, IL 60613
info@chennytroupe.org
773-404-6467

YOU MUST MAKE A RESERVATION AND PAY THE FEE IN ORDER TO ATTEND THE SESSIONS.