

## TONY GRAVLEY SEMINAR REGISTRATION

Full payment is required with your Registration. Please make checks payable to CABTC. Mail registration to:

Kathie Lester  
2724 Ralph Ave  
Cleveland, Oh 44109

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Your Name: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

### **Choose One:**

Working Spot:

- Key Bearing Member (\$275) \_\_\_\_\_
- Club Member (\$300) \_\_\_\_\_
- Non-Club Member (\$325) \_\_\_\_\_

Audit Spot:

- Key Bearing Member (\$100) \_\_\_\_\_
- Club Member (\$125) \_\_\_\_\_
- Non-Club Member (\$150) \_\_\_\_\_

Add Lunch (\$10/day) Thursday: \_\_\_\_\_ Friday: \_\_\_\_\_