Application for BOTC youth Scholarship Program

Name: _____

Address: _____

_____

Age: ____ Phone number_____

Interested in Obedience, Agility or tracking? _____

Breed of your dog_____Dog's age_____

Please write a short essay on what you hope to get from taking a class or seminar and include any previous experience that you have had with your dog. _____
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Parent or guardian signature_____

Date_____

Return completed form to: Lynda Morgan, 7 Coopers Bay, Grand Isle, VT 05458