



WILDLIFE HANDLING AND CHEMICAL IMMOBILIZATION COURSE

Wolf Haven International, Tenino, Washington
November 3, 4 and 5, 2009

COURSE REGISTRATION

Participant name: _____
(first, last, middle init.)

Agency affiliation: _____

Participant address: _____
(street address or P.O. box, city, state, zip)

Daytime phone: _____

Daytime cell phone: _____

Email: _____

Payment: Enclosed check or money order payable to Wolf Haven International

Credit card # _____ Expiration _____

I would like information on lodging for my stay: Via E-mail (above) Via postal mail (above)

Please briefly describe your experience working with wildlife:

GWR courses emphasize material that meets the specific needs of the participants. Please indicate which species, immobilizing drugs, and field situations you would like to have addressed at the seminar.

What species would you like to cover?

Which immobilizing drugs would you like to cover?

What type(s) of drug delivery system do you use or are interested in?

What other needs or expectations do you have?

Please return this registration form along with payment to:

Wolf Haven International
Attn: Linda Saunders
3111 Offut Lake Rd.
Tenino, WA 98589

Questions: Call Linda Saunders at (360) 264-4695 x216 or E-mail lsaunders@wolfhaven.org

A confirmation letter and information packet will be mailed to you following receipt of your registration.

THANK YOU!!