



**2026 Georgia State NAPWDA Workshop
Patrol, Narcotics, Explosive Detection, Tracking**

REGISTRATION FORM

2026 NAPWDA Georgia State Workshop

September 13th – 18th, 2026

Hosted by: Calhoun Police Department

See Workshop & Registration sheet for payment and important information

PLEASE PRINT CLEARLY AS YOU WANT YOUR CERTIFICATE TO READ

One handler/dog team per form.

NAME: _____

AGENCY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

WORK PHONE: _____ CELL: _____

EMAIL: _____

K-9 NAME: _____ BREED: _____

How many years/months have you worked as a team with this K-9? Years _____ Months _____

Purpose for attending: Training only Certification (new) Certification (renewal)

Please check all that apply. **Note: This workshop's focus is certification**

Purpose	Certification	Purpose	Certification
Patrol	<input type="checkbox"/>	Bloodhound Tracking	<input type="checkbox"/>
Narcotics	<input type="checkbox"/>	Article Search	<input type="checkbox"/>
Area Search	<input type="checkbox"/>	Explosives	<input type="checkbox"/>
Tracking	<input type="checkbox"/>	Search and Rescue	<input type="checkbox"/>

Waiver: As the undersigned participant, I recognize the possibility of injury occurring as the result of my participation in the K9 Workshop. I furthermore state that my canine and I are in a physical



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condition necessary to be able to participate in the events, as needed for training and certification purposes. I hereby wave and relinquish the North American Police Dog Association, further referred to as NAPWDA, the Calhoun Police Department, their affiliates, sponsors, organizers, and all participants, for any injury, mental or physical, to myself or my canine I furthermore will accept the responsibility of traveling to and from the event, as well as to and from all venues and accommodations. I also guarantee to abide by all rules and regulations set forth by NAPWDA and the event organizers. I furthermore will accept responsibility for any damage caused by my canine or myself to all property, persons including any hotel accommodations and/or any training venues.

Date: ___/___/___ Sign Name: _____

Print Name: _____