

**North West Chapter  
Cesky Fousek North America  
Test Payment Form 2020**

Field Test Entry

Natural Ability @	\$50.00	_____
Intermediate @	\$60.00	_____
Utility @	\$70.00	_____
Fee for non-member @	\$10.00	_____

Pre Test Handler's Clinic @ \$10.00 \_\_\_\_\_

N W Chapter Dues

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

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

City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

@ \$10.00/year \_\_\_\_\_

Grand Total \_\_\_\_\_

Make one check for the Grand total of all fees payable to: Dennis Carlson. Please return **ALL** forms, along with the check to Dennis Carlson, 3801 Barrett Dr., Hood River OR, 97031 carlson@gorge.net

Dennis Carlson will be serving as Field Test Chairman. Please direct all scheduling concerns and questions about the test to him at 541-386-4830