



## 2019 NAPWDA SOUTH CAROLINA STATE WORKSHOP October 21 – 25, 2019

**Hosted By: Charleston County Sheriff's Office/ Boeing**

**Location:**

The Charleston County Sheriff's Office and Boeing are hosting the State Workshop for South Carolina in Charleston, SC. The Workshop will be held Monday, October 21 thru Friday, October 25, 2019. The Workshop is open to single purpose and dual purpose dogs.

**Complete Workshop Covering:**

Training as well as certification will be for the following areas: Narcotics, Explosives, Tracking, Evidence (Article) Search, Area Search, Building Search, Agility, Obedience and Aggression Control.

You do not need to be a NAPWDA member to attend and train but you must be a CURRENT and in good standing NAPWDA member if you wish to certify in any of the certification areas offered. PLEASE be familiar with NAPWDA By-laws and Certification rules as they will be followed for certification purposes, NO EXCEPTIONS, a copy of the By-laws and Certification Rules will be available at the workshop or can be viewed / printed from the NAPWDA web page at: <http://www.napwda.com/uploads/bylaws-cert-rules-november-16-2013.pdf>.

**Instructors:**

NAPWDA Master Trainers will be Mary "Mickey" Januszkiewicz, Doug Wannemacher, and Matt Hall.

**Workshop Fee:**

The cost of the workshop is \$225.00 per K9 team with workshop checks made payable to the CCSO K9 Foundation. A K9 team is 1 handler with 1 dog. *There is an additional workshop fee of \$75.00 per additional dog for any K9 Handler wishing to train or test with an additional dog.*

**NAPWDA Membership Dues:**

*Membership dues are \$45.00 per year. **Make NAPWDA Membership dues a SEPARATE CHECK payable to NAPWDA. Do not include this money in the same check as the workshop registration fee.***

**Civilian & SAR Handlers applying for Associate Membership must be sponsored by a current NAPWDA Regular member and must provide a current Criminal History Records Check at the time they initially join and upon renewing yearly. This record check must be obtained from a Law Enforcement Agency and cover that person for the entire United States or entire State that they live in (not just a city or county level). Associate Membership Info & Application may be printed out from the NAPWDA web site (Membership Information tab). View Certification Test Rules at <http://www.napwda.com/uploads/bylaws-cert-rules-november-16-2013.pdf>.**

**Send fees and registration form to:**

Charleston County Sheriff's Office

Attention: Lt. Jay Christmas

3715 Leeds Ave

North Charleston

S.C., 29405

**Host Hotel:**

Aloft

4875 Tanger Outlet Blvd

North Charleston, SC 29418

843-566-7300

North American Police Work Dog Association (CCSO K9 Training), a group rate has been set up.

**The attendees can call 843-566-7300 for Aloft to make reservations and tell the clerk that they are with NAPWDA CCSO K9 training when they call.**

**\*\*\*K9 must be in crate when Handler is away from room. The Handler and the Handler's individual agency are responsible for any/all damages to the room caused by K9.**

**Contact Person:**

For any questions regarding the Workshop, Accommodations, or Directions, please contact Lt. Jay Christmas

Office: (843) 202-1700

Cell: (843) 847-6141

E mail: [jchristmas@charlestoncounty.org](mailto:jchristmas@charlestoncounty.org)

**2019 NAPWDA SOUTH CAROLINA STATE WORKSHOP**

**October 21 - 25, 2019**

**Registration Form:**

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

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

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

E Mail: \_\_\_\_\_

Agency: \_\_\_\_\_

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

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

Work Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

**NAPWDA Workshop Waiver:**

The undersigned participant recognizes the possibility of injury occurring as a result of his/her participation in the K9 Workshop. I furthermore state that my canine and I are in a physical condition necessary to be able to participate in the events, as needed for training and certification purposes. I hereby waive and relinquish the North American Police Work Dog Association, further referred to as NAPWDA, the Charleston County Sheriff's Office and the County of Charleston, their employee's, affiliates, sponsors, organizers, and or all participants, for any injury, mental or physical, to myself or my canine. I also agree to abide by all rules and regulations as set forth by NAPWDA and the event organizers. I furthermore will accept responsibility for any damage caused by my canine or myself to any and all property, persons and to include the hotel accommodations and or any training venue. If you decide to consume any alcoholic beverage during the workshop week, you do so at your own risk. If you do drink an alcoholic beverage please do so in a responsible manner and Don't Drink and Drive.

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Sign Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**NAPWDA Member? Regular**\_\_\_ **Associate**\_\_\_ **Current**\_\_\_ **New**\_\_\_

**K9 Breed:** \_\_\_\_\_ **K9 Name:** \_\_\_\_\_ **K9 Age:** \_\_\_\_\_

Type of K9 (check appropriate descriptions):

Patrol \_\_\_ Narcotic \_\_\_ Cadaver \_\_\_ Dual Purpose \_\_\_ Bloodhound \_\_\_

K9'S Working Ability: Beginner \_\_\_ Intermediate \_\_\_ Advanced \_\_\_

Handler's Ability: Beginner \_\_\_ Intermediate \_\_\_ Advanced \_\_\_

**Are you wishing to certify?** Yes \_\_\_\_\_ No \_\_\_\_\_

**In what areas do you wish to attempt certification?**

Utility (Patrol): \_\_\_\_\_ Narcotics \_\_\_\_\_ Explosives \_\_\_\_\_ Trailing \_\_\_\_\_

If certifying, which areas of certification you will be attempting: \_\_\_\_\_

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**Make Workshop Checks Payable to: CCSO K9 Foundation**

**Make NAPWDA Membership Dues (SEPARATE CHECK) payable to: NAPWDA**

**Send fees and registration form to:**

Charleston County Sheriff's Office

Attention Lt. J. Christmas

3715 Leeds Ave., N. Charleston, S.C., 29405