TCVESSA AMBASSADOR AWARD FORM

Your Name_____

Address_____City/St/Zip_____

Phone_____Email_____

List Call Names of dog(s)_____

Enter Total Hours Here_____

DATE	LOCATION/EVENT	NAME OF DOG	HOURS

AWARD DEADLINE IS JANUARY 31ST Scan/e-mail forms to: rosebudspringers@gmail.com
or mail to: Alice Musburger, 626 South Swift Avenue, Litchfield, MN 55355 (320-290-3124)