



Take a Bite Out of Canine Cancer

A Weekend Gathering to Benefit
Ohio State University's
Greyhound Health & Wellness Program

Attendee Registration Form:

First Name	<input type="text"/>
Last Name	<input type="text"/>
Mailing Street Address	<input type="text"/>
Phone (w/ Area Code)	<input type="text"/>
Email	<input type="text"/>
Name(s) of dog(s) in Party?	<input type="text"/>
Dog Breed(s)? So our vendors can plan ahead	<input type="text"/>
How did you hear about us? Examples: Newspaper, Radio, Friend, etc.	<input type="text"/>

Registration Fees and Options		
Description	Number	Total Amount
Number attending \$50/person	<input type="text"/>	<input type="text"/>
Pre-Purchase Raffle Tickets \$1 each or 6 for \$5	<input type="text"/>	<input type="text"/>

Please **mail checks** (made payable to 'Greyhounds Rock') to:

Greyhounds Rock
10617 Piney Branch Rd
Spotsylvania, VA 22553