

## Handler Clinic Registration Form

Name \_\_\_\_\_

Address \_\_\_\_\_

NAVHDA Member ship \_\_\_\_\_ (not required unless applying for apprentice judgeship)

Phone Number \_\_\_\_\_

Make check payable to - **N. Central WI NAVHDA** & send registration form to Clinic contact person.

Julie Carlstrom  
13610 Griffith Ave  
Bancroft, WI 54921

If you have questions call 715-421-3227

**Note the "Kristin Rieser Youth Scholarship Fund" will reimburse any young clinic attendees (12-18 year olds) 100% of the Handler Clinic fee all they have to do is apply See the attached information.**