

Wiener Dog Race
Registration Form 2018

Race Heat: _____

Name of wiener dog: _____

Age of wiener dog: _____

NAME OF OWNER: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

We would welcome any other information to share for the program.

For example: What type of training regimen did you have your dog on? Did your doggie come from a long line of race winners?

Registration Fee: \$5 (check or cash)
Make check payable to the Luverne Area Chamber
213 East Luverne Street – Luverne, MN 56156