

SAN JOAQUIN DOG TRAINING CLUB, INC.
CLASS REGISTRATION FORM

October 2018

Owner: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Email: _____ Age: (if under 18) _____

Handler if other than owner: _____ Phone: (if different from above) _____

Dog's Call Name: _____ Sex: Male Female

Breed: _____ Neutered/Spayed? Yes No

Age of Dog: _____ Is this a Rescue dog? Yes No

Enrollment cost for all classes is \$110 for 6 weekly lessons
checks payable to SJDC

**One time Spay or Neuter Discount of \$5.00 off any class with veterinary certificate*
**One time Discount for Rescue Dogs, with paperwork - 50% refund upon completion of class*
**Youth 12 - 16 years - \$55, any age dog, any class. Please, no handlers under 12 yrs.*

TO REGISTER: Arrive ½ hour prior to the start of your class **BRING VACCINATION RECORDS!**

- Basic Obedience:** 6:30 pm For Beginning dogs 6 months of age and over
- Puppy:** 6:00 pm For Puppies 3 to 6 months of age
- Basic 2 + Rally intro:** 7:30 pm For dogs that have completed Basic or equivalent

AGREEMENT TO HOLD HARMLESS WAIVER AND ASSUMPTION OF RISK

I (WE) UNDERSTAND THAT ATTENDANCE OF A DOG IN TRAINING CLASS IS NOT WITHOUT RISK TO MYSELF, MEMBERS OF MY FAMILY, OR MY GUESTS WHO MAY ATTEND, OR MY DOGS. I (WE) HEREBY WAIVE, RELEASE AND HOLD HARMLESS SJDC, IT'S OFFICERS, MEMBERS, INSTRUCTORS, AND AGENTS, SYCAMORE LANE KENNELS, AND ALL PARTIES FROM ANY AND ALL LIABILITY FOR ANY INJURY, DAMAGE OR LOSS WHICH I, MY DOGS, MY FAMILY MEMBERS OR GUESTS MAY SUFFER ON THE TRAINING PREMISES, GROUNDS OR SURROUNDING AREA THERETO. I FURTHER AGREE TO PAY FOR ANY INJURY OR DAMAGE WHICH IS A RESULT OF ACTIONS BY MYSELF, MY DOGS, MY FAMILY MEMBERS, OR MY GUESTS. I ALSO UNDERSTAND THAT THERE WILL BE NO REFUNDS FOR CLASSES.

SIGNATURE OF DOG OWNER OR AUTHORIZED AGENT:

DATE: _____

How did you learn of our classes? Please Circle all that apply:
Newspaper Ad, Internet Classifieds, Website, Flyer, Vet Referral, Friend, Other

****SECTION BELOW TO BE FILLED IN BY SJDC MEMBER TAKING SIGN-UPS WHEN VACCINATION RECORD IS CHECKED.****

DHPP due _____ Bordetella due _____ Dog Flu due _____ Rabies due _____

Paid (cash amount or check number) _____ **Club member initials** _____