

SAN JOAQUIN DOG TRAINING CLUB, INC.
CLASS REGISTRATION FORM

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
Cash or Check Only Payable to SJDTC

- *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:** 7:30 pm For dogs that have completed Basic or equivalent

AGREEMENT TO HOLD HARMLESS LIABILITY WAIVER AND ASSUMPTION OF RISK

I (WE) UNDERSTAND THAT ATTENDANCE OF A DOG IN A TRAINING CLASS IS NOT WITHOUT RISK TO MY DOG(S), MYSELF, MEMBERS OF MY FAMILY, OR MY GUESTS WHO MAY ATTEND. I (WE) HEREBY WAIVE, RELEASE AND HOLD HARMLESS SJDTC, IT'S OFFICERS, MEMBERS, INSTRUCTORS, AND AGENTS, SYCAMORE LANE KENNELS, ALL DOG SPORTS, AND ALL PARTIES FROM ANY AND ALL LIABILITY FOR ANY INJURY OR ILLNESS INCURRED, DAMAGE OR LOSS WHICH I, MY DOG(S), MY FAMILY MEMBERS OR GUESTS MAY SUFFER FROM BEING 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 DOG(S), 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: _____

VACCINATION RECORD AND INFOMATION BELOW TO BE FILLED IN BY SJDTC

DHPP due _____	Veterinarian _____	Phone: _____
Bordetella due _____		
Dog Flu due _____	Given Training Guidelines <input type="checkbox"/>	
Rabies due _____		
Check number or Cash _____	Signed Sycamore Waiver <input type="checkbox"/>	
Member initial _____		
	SJDTC Club Member	Yes <input type="checkbox"/>