

DAYTON DOG TRAINING CLUB

AGILITY CLASS REGISTRATION/RELEASE FORM

EACH SESSION COSTS \$85.00 FOR NON-MEMBERS (\$75 FOR CLASS PLUS A USER FEE OF AN ADDITIONAL \$10) A SESSION IS MADE UP OF ONE CLASS PER WEEK FOR 7 WEEKS WITH EACH CLASS LASTING APPROXIMATELY 1 HOUR.

In joining the Dayton Dog Training Club (DDTC) agility classes as a student, I hereby assume all responsibilities and risks for the accidents and damage to my property, others, or myself that result from the actions of my dog. No member or instructor of the Dayton Dog Training Club Inc. shall be held liable for injury and/or damage to my person or property, whether due to uncontrolled dogs or negligence of any member or instructor of the Dayton Dog Training Club.

If in any way I am dissatisfied with the agility instructions, as set forth on the first night of training, I have the option to request reimbursement of the fees paid. However, thereafter the DDTC, having reserved space for both the trainee and dog, is not liable for returning any fee.

I understand that all dogs registered in DDTC classes must have current distemper, hepatitis, and parvo vaccinations and that all dogs over 6 months of age or older must have current rabies vaccinations. DDTC also recommends, but does not require current vaccinations against kennel cough (Bodetella).

My dog shot records have been turned in for a previous class taken in the past 12 months:

Yes _____ You do NOT need to include a copy of your dog's vaccination record.

No _____ You need to include a copy of your dog's shot record with this application.

I attest that I have read the information above and agree to all terms of this application. I attest that my dog's vaccinations are up to date.

DATE: _____ SIGNED: _____ PLEASE PRINT LEGIBLY OR TYPE
FOLLOWING INFORMATION. THE INFORMATION SHOULD BE FOR THE PERSON HANDLING THE DOG.

Name: _____ Member(circle:) Yes No
Address: _____ City: _____ Zip: _____
Phone #: _____ Email: _____
Dog Name: _____ Breed: _____ Age: _____
SEX: (Circle) Male Female Is the dog spayed or neutered Yes ___ No ___

I am registering this dog for the following class(es):

Class: _____ Day _____ Time _____
Class: _____ Day: _____ Time: _____

Did you get approval from lead instructor of the class just completed and/or class you are presently requesting?
Yes _____ No _____ Which class did you just complete? Day: _____ Time: _____

Member - \$40 Member w/training privilege - \$60 Non-member - \$85 Member w/Teaching Certificate - \$10
PAYMENT (circle): Cash (not by mail) Check #: _____ Money order Amount: _____

We do not accept credit cards.

If registering by mail, payment should be by check or money order made out to Dayton Dog Training Club
We also have a drop box on the wall when you enter the building from the back.

Class space is limited and it is first received. Please have your registration form with payment sent to Terry or in drop box at least one week before classes start. Payment must be enclosed to be placed on class roster.

MAIL PAYMENT TO: Terry McCarty, Registrar 3658 Green Cove Ct., Beavercreek, Ohio 45430

You will be notified that your application has been received and class requested is confirmed.

If you have any questions/concerns do not hesitate to contact me: Rita Drewry – Director of Agility (937-572-2110)