

Club Fido CLASS REGISTRATION FORM

****PAYMENT MUST ACCOMPANY REGISTRATION FORM****

A completed form is required for EACH dog & EACH class entered. Payment must accompany registration form. Please make checks payable to Club Fido . There is a \$25 charge for any check returned to Club Fido by the bank.

Name of Handler	Occupation	Age	How did you hear about us?
Address	City	State	Zip Code
Home Phone	Work Phone	Work Hrs.	Email Address

Please be sure your work phone is included along with your home phone. In case of a canceled class, we MUST phone you.

Breed of Dog	Sex	Age		Call Name
	M <input type="checkbox"/> F <input type="checkbox"/>	Yr.	Mo.	
Has this dog, at any time, shown signs of aggression?				Yes <input type="checkbox"/> No <input type="checkbox"/>
What other interests do you have with your dog?				
Has this dog had previous Agility Training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If YES, where and what does your dog know?	

<input type="checkbox"/> Rabies Vaccination	<input type="checkbox"/> License	<input type="checkbox"/>	<input type="checkbox"/>
Classes for Club Fido			
<input type="checkbox"/> Agility Basics	<input type="checkbox"/> 4 Fun Rally-O		
<input type="checkbox"/> Beginner Obedience	<input type="checkbox"/> Advanced-CGC Class		
<input type="checkbox"/> Intermediate Obedience	<input type="checkbox"/> Private		
<input type="checkbox"/> Puppy STAR Class	<input type="checkbox"/> Semi-Private		

As a condition to acceptance of this application, the following Agreement must be signed.

AGREEMENT TO HOLD HARMLESS, WAIVER AND ASSUMPTION OF RISK: I understand that attendance of a dog training class is NOT without risk to myself, members of my family or guests who may attend, or my dog; because the dogs to which I will be exposed may be difficult to control and may be the cause of damage or injury, even when handled with the greatest amount of care. I hereby waive and release Club Fido DayCare and DogSports Training Center., hereinafter Club Fido, and its officers, from any damage or injury resulting from the action of any dog. I expressly assume the risk of such damage or injury that I or my dog may suffer while attending any training session or any other function of Club Fido, or while on the training grounds or the surrounding area. I understand that by signing or executing this form, I am releasing Club Fido, its officers, members, and agents from any liability for damages or injury even if Club Fido, its officers, members, and/or agents are negligent. While we all have busy schedules our Semi-Private and Private classes are 4 weeks in length. Please make sure you have the time to complete the classes. We would be happy to reschedule 1 class but 1 class only to fit your and our needs.

In consideration of and as inducement to the acceptance of my application for training by Club Fido, I hereby agree to indemnify and hold harmless Club Fido, its officers, members, and agents from any and all claims by members of my family or any other person accompanying me to any training session or function of Club Fido, or while on the premises or the surrounding area as a result of any action by any dog, including my own.

I hereby certify that I am over 18 years of age and of sound mind.

Signature: _____

PLEASE RETURN COMPLETED FORM TO: **Deb Jacobs**
320-D No. College St
Palmyra, Pa 17078

Date: _____
QUESTIONS: (717) 838-4990
deb@clubfidodaycare.com

For Club Use Only:			
Amount Paid \$ _____	Check: _____	Cash: _____	Credits: _____