



# Victoria Dog Obedience Club



"Man's Best Friend is an Obedient Dog"

Website: www.victoriadogobedienceclub.com

Email: vdoc1981@gmail.com

## Application for Training

### HANDLER INFORMATION:

Name: \_\_\_\_\_

Age (If under 18): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Will call for rainouts 1 hour before class

Indicate class(es) preferred

Check	Class	Duration	Requirements	Cost	Day	Time
<input type="checkbox"/>	STAR Puppy	7 Weeks	4-6 Months Old	\$90	Monday	7:30-8:30
<input type="checkbox"/>	Basic Puppy	7 Weeks	4-6 Months Old	\$90	Tuesday	7:30-8:30
<input type="checkbox"/>	Basic	7 Weeks	Over 6 mos old	\$90	Tuesday	7:30-8:30
<input type="checkbox"/>	Advanced	7 Weeks	Over 6 mos old	\$90	Tuesday	7:30-8:30
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

### DOG INFORMATION:

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Sex: \_\_\_\_\_

Call Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Last Vaccinations: \_\_\_\_\_

Rabies: \_\_\_\_\_

DHL: \_\_\_\_\_

What do you want to accomplish/learn in this class with your dog? (Circle all that apply)

Sit/Down

Walk on leash

Pass STAR puppy

Stay

Pay attention to me

Pass the Canine Good Citizen

No Jumping

Heel on leash

Other Please Explain

Come when called

Calmer around other dogs

\_\_\_\_\_

**AS A CONDITION TO ACCEPTANCE OF THIS APPLICATION THE RELEASE AGREEMENT ATTACHED TO THIS APPLICATION MUST BE SIGNED**

Pictures may be take and used for club publicity.

### OFFICIAL USE ONLY:

Proof of Vaccination: \_\_\_\_\_

Class: \_\_\_\_\_

Collar: \_\_\_\_\_

Instructor: \_\_\_\_\_

Paid:

Lead: \_\_\_\_\_

\$ \_\_\_\_\_

Cash

Check # \_\_\_\_\_

Remarks:

CC /Paypal \$94



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## AGREEMENT TO HOLD HARMLESS WAIVER AND ASSUMPTION OF RISK

I understand that attendance of a dog obedience training class is not without risk to myself, members of my family or guest who may attend my dog, because some of the dogs to which I will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care.

I hereby waive and release the VICTORIA DOG OBEDIENCE CLUB hereinafter referred to as the "Training Organization", its volunteers, officers, members and agents, from any and all liability of any nature, for injury or damage which I or my dog may suffer; including specifically, but without limitation, any injury or damage resulting from the action of any dog, and I expressly assume the risk of such damage or injury while attending any training session, or any other function of the Training Organization, or while on the training grounds a surrounding area thereto.

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

AS A CONDITION TO ACCEPTANCE OF THIS APPLICATION THE FOLLOWING MUST BE INCLUDED:

- 1) Application
- 2) Signed Release Agreement
- 3) Copy of your Rabies Certificates

\_\_\_\_\_  
SIGNATURE OF OWNER OR AGENT

\_\_\_\_\_  
DATE

How did you learn about these classes?

- Veterinarian    •Newspaper Ad  
•Pet Store        •Groomer  
•Radio             •Trainer  
•Former Trainer •Other\_\_\_\_\_