

## SEWARD COUNTY KENNEL CLUB TRAINING CLASS REGISTRATION FORM

**Class (check one):**     PUPPY (\$60)     BASIC (\$65)

**PLEASE PRINT CLEARLY – the information provided will be used on your class certificate**

Owner \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Email address \_\_\_\_\_ Handler's Name \_\_\_\_\_

Dog's Name \_\_\_\_\_ Breed \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

	YES	NO
Have you ever trained a dog before?		
Has this dog been through an obedience class before?		
Is your dog aggressive towards other dogs? (If "yes," please explain below)		
Is your dog aggressive towards people? (If "yes," please explain below)		
Has your dog been properly vaccinated against distemper, hepatitis, parvo, corona, parainfluenza, leptospirosis? (Bordetella is recommended)		
Has your dog been vaccinated against Rabies?		
Is your dog on a heartworm preventative?		
How did you learn about our classes?		

Registration fee is non-refundable after the first night of class.

For the safety of all dogs and handlers, females in heat are not allowed in class.

I hereby waive and release the Seward County Kennel Club, it's officers and members, from any and all liability of any nature, for injury or damage which I or my dog may suffer, resulting specifically and 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 other function of the Seward County Kennel Club, or while on the training grounds or the surrounding area thereto.

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

Signature \_\_\_\_\_  
 (If under 18, must be signed by parent or guardian)

**OFFICE USE ONLY**

Date	Fee	Discount	<b>Total</b>	Cash (√)	Check #