



OBEDIENCE REGISTRATION

Session Dates: _____

Owner's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

E-Mail Address: _____

Breed: _____ Call Name: _____ Age: _____

Please Check Day & Fill In Time: Monday Tuesday Class Time _____

Please Choose A Class – Not all classes available on all days. Please check the schedule.

Basic ___ Advanced Basic ___ Novice ___ Open ___ Beg Utility or UDX –**email Dawn**

Fee \$130.00 per 8 week session per dog. No one handler may enter two dogs in same class.

Pre-Registration a MUST - APPLICATION MUST BE SIGNED

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- Requirements** Handlers must be 14 years or older to participate in the Adult classes. Dogs MUST be current on all vaccinations. Dogs must be on leash outside of training class. No Loose unattended dogs. Dogs should be treated with respect. Regular buckle collars are recommended. Any other collar requires permission from your instructor. Appropriate footwear (support, non skidding soles) is required.
- Cleanup** Exercise dogs in designated areas. Scoop all poop thoroughly. Take poop with you or deposit it outside receptacle designated for dog poop.
- Children** Children not participating in a training class must be under the supervision of an adult at all times. Children must remain in the same room as supervising adult. No running the building. No playing in the parking area.
- Disturbances** Do not leave barking dogs in cars. Barking dogs inside facility that are disturbing training classes will be required to be removed.
- Attendance** Training builds each week on previous training. Participants should attend regularly to benefit from class. They should advise their instructor if they will be absent.
- Refunds** After the 1st class of the session there are NO refunds. Credit will be given for another session if there is an emergency or if your bitch comes in season.
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My dog was vaccinated against rabies by: Dr. _____ Date: _____ Tag#: _____

I have read, understand, and agree to abide by the rules on the back. I understand that failure to conform to the rules can lead to my being barred from class participation by the Catoclin Kennel Club Training Director. I certify that dog(s) participating in training have been immunized against rabies and DHL. Parvo recommended. I further certify that the dog(s) are in good health. I hold the Catoclin Kennel Club and instructors harmless from any and all liability, costs and expenses arising as a result of this activity, including but not limited to, injury or death of dogs, bodily injury or death to any person and damage to property of any kind.

Signature: _____ Date: _____
(Parent or legal guardian if a Junior)

Make checks payable to **CATOCTIN KENNEL CLUB** and mail to:
Dawn Buttton, 17301 White Plains Court, Mt Airy, MD 21771

(email) blazinkennels@comcast.net