



DDTC PAPER CLASS REGISTRATION FORM

A completed form is required for EACH dog and EACH class entered.
Payment must accompany registration form.

Handler Name: _____ DDTC Member: ☐ No ☐ Yes
No handlers under age 10. Handlers 10-15, a parent/guardian must be ringside during class

Cell Phone (required): _____ Email (required): _____

Emergency Contact Name: _____ Cell Phone: _____

Dog's Call Name: _____ Breed: _____ Age: _____ Gender: _____

New Dog to DDTC: ☐ No ☐ Yes Last Class Completed/When/Where: _____

Has this dog ever shown signs of viciousness? ☐ No ☐ Yes

Class Session (Circle one): **SPRING** **SUMMER** **FALL** **WINTER**
Class Category (Circle one): **Agility** **Puppy/Family Dog** **Obedience** **Rally** **Scent Work**

Class Name: _____ **Instructor:** _____

Class Day: _____ **Start Time:** _____

AS A CONDITION TO ACCEPTANCE OF THIS APPLICATION, YOUR SIGNATURE INDICATES AGREEMENT WITH THE FOLLOWING PARAGRAPHS

No dog with a communicable disease shall be on DDTC property. Registrants should follow their veterinarian's recommendations to ensure that their dogs are free of internal and external parasites, any communicable disease, and have appropriate vaccinations. Commonwealth of Pennsylvania State legislation Act 181 of 1986 requires all dogs over three months of age to have a current rabies vaccination certificate.

All persons on DDTC property while in attendance at or participating in any Club event grants the Club the right to use their or their animal's likeness, photograph or otherwise without further release or consent for Club-related marketing or promotional activities.

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 DAUPHIN DOG TRAINING CLUB, INC., hereinafter DDTC, 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 DDTC, or while on the training grounds or the surrounding area. I understand that by signing or executing this form, I am releasing DDTC, its officers, members, and agents from any liability for damages or injury even if DDTC, its officers, members, and/or agents are negligent. In consideration of and as inducement to the acceptance of my application for training by DDTC, I hereby agree to indemnify and hold harmless DDTC, 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 DDTC, 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: _____ **Date:** _____

Current Fees Per Dog, Per Session: Please make checks payable to DDTC. There is a \$20 returned check fee.

DDTC Member \$75 OR 25 DR	DDTC Senior Member \$55 or 18 DR	Non-Member \$95
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Please return completed form to: DDTC c/o Sallie Jordan, 65 March Circle, Winfield, PA 17889

For Class Information Contact: Sallie Jordan – ddtc.registrar@dauphindog.org Phone: 570-523-7568

Club Use Only: Amount paid: _____ ☐ Cash ☐ Check # _____ ☐ Vouchers _____ **Volunteer Rewards:** ☐ 18 ☐ 25