



Class Registration Form

Please select a class. Fill out one registration form for each class.

- | | |
|---|-------------------------------------|
| _____ Puppy Kindergarten (\$70; \$5 extra for Star Puppy) | _____ Agility Boot Camp (\$70) |
| _____ Puppy Plus (\$70) | _____ Foundation Agility I (\$70) |
| _____ Basic Obedience (\$70) | _____ Foundation Agility II (\$70) |
| _____ Intermediate Obedience (\$70) | _____ Foundation Agility III (\$70) |
| _____ Focus and Engagement (\$70) | _____ Foundation Agility IV (\$70) |
| _____ Rally Obedience (\$70) | _____ Competitive Agility |
| _____ Conformation | |

Please select a class session. Check our Calendar page for the day and time of the classes. You may not register for a partial session.

- | | |
|-------------------------|-------------------------|
| _____ January/February | _____ March/April |
| _____ May/June | _____ July/August |
| _____ September/October | _____ November/December |

CASH OR CHECKS ONLY. WE DO NOT ACCEPT CREDIT CARDS.

Make checks payable to: **GRAND FORKS DOG TRAINING CLUB**

Mail to: GFDTC, 1905 So. Washington St, Grand Forks, ND 58201

Phone (701) 215-3005

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

YOU ARE RESPONSIBLE FOR CHECKING THE TIME/DATE OF CLASSES. ALL INFORMATION CAN BE FOUND ON OUR WEB SITE. IF YOU PROVIDE AN EMAIL, A CONFIRMATION WILL BE SENT TO YOU. PLEASE CHECK YOUR JUNK FOLDER IF YOU DO NOT RECEIVE.

Age of Handler (if under 18): _____

(Parent or Guardian must sign Liability Waiver on behalf of handlers under 18)

Breed of Dog: _____ Name: _____

Date of birth of Dog: _____ Sex of Dog: _____

Vaccinations Up To Date: ()Yes ()No Spayed/Neutered: ()Yes ()No

LIABILITY WAIVER:

*On behalf of myself, my heirs, executors, administrators and assignees: I hereby waive and release any and all rights and claims for damages which I may have against the **Grand Forks Dog Training Club**, its Board of Directors, Officers, Members, Training Director and Training Staff, as well as any others connected with this class or event, their heirs, executors, administrators, successors, and assignees for any and all injuries which I and/or any member of my family and/or friends, or my dog may suffer or cause while taking part in this class or event or as a result thereof.*

I UNDERSTAND IT IS THE POLICY OF THE GFDTC NOT TO ISSUE REFUNDS.

Signature: _____ Date: _____

I consent that photographs or videos taken while involved in Grand Forks Dog Training Club activities may be used or reproduced by the Grand Forks Dog Training Club for educational promotional purposes, including news media and publications. Initial: _____



Class Registration Form

Has your dog trained in classes before? () Yes () No

If yes, where? _____ What class: _____

How did you hear about us? _____

If vet or business, who? _____

Main trainer in family: _____ Secondary trainer: _____

YOUR TRAINING EXPERIENCE

| | | |
|------------------------------------|------------------------------|--------------------------------|
| First dog | Trained dog for pet | Trained dog for agility |
| Owned previous dog but not trained | Trained dog for conformation | Trained dog for obedience ring |
| Trained dog for hunting | Other | |

HOW DID YOU ACQUIRE THIS DOG?

Breeder Neighbor/Friend Pet Store Gift Shelter/Rescue Found

DOG'S PERSONALITY

| | | |
|------------------------|---------------------------|--------------------|
| Friendly to people | Nervous around people | Jumps on people |
| Friendly to other dogs | Nervous around other dogs | Uses mouth to play |
| Shy around people | Aggressive towards people | Barks frequently |
| Shy around dogs | Aggressive towards dogs | Snaps or bites |

What are your goals for you and your dog? _____

What do you like about your dog? _____

What is not so good about your dog? _____

How does your dog spend his/her day? _____

List any special problems or concerns you may have here and on an additional sheet if necessary: