



PISCATAQUA OBEYANCE CLUB, INC. APPLICATION FOR TRAINING

Complete (print) sections A, B, & C, read the Agreement, and sign. \$30 deposit payable to P.O.C. Please call to hold your space (Dover, NH: 603-749-2275; York & Kittery, ME: 207-363-2574) and then mail the form. For classes in Dover, mail to Diane Ellis Manocchia, 66 Third St., Dover, NH 03820. For classes in Kittery or York, mail to Sue Walsh, 29 Axholme Road, York, ME. 03909.

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| HANDLER INFORMATION (Section A) | NAME: _____ AGE: (If under 18) _____ ADDRESS: _____ E-mail: _____ _____ Home phone: _____ Work phone: _____ |
| DOG INFORMATION (Section B) | NAME OF DOG: _____ BREED: _____ AGE OF DOG: _____ SEX OF DOG: Male Female Neutered/Spayed How long have you had your dog? _____ Where did you obtain your dog? Breeder Pet Store Shelter Adoption Other (Please specify) _____ _____ GENERAL INFORMATION (Section C) Veterinarian: _____ Class Desired: _____ Location & Time: _____ Have you owned a dog before? Yes No If yes, what breed(s)? _____ Have you trained a dog before? Yes No If yes, when and where? _____ How did you learn about our classes? _____ Briefly state what you hope to accomplish in this class: _____ _____ |
| AGREEMENT <i>To hold harmless, waiver, and assumption of risk.</i> | <p>I understand that attendance at a dog obedience class is not without risk to myself, members of my family, or guests who may attend, 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.</p> <p>I hereby waive and release the PISCATAQUA OBEYANCE CLUB, hereinafter referred to as the "Training Organization," its employees, 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 to 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 or the surrounding areas thereto.</p> <p>In consideration of and as an inducement to the acceptance of my application for training membership by this organization, I hereby agree to indemnify and hold harmless this Training Organization, its employees, officers, members, and agents from any and all claims, or claims by any member of my family or any other person accompanying me to any training session or function of the Training Organization, or while on the grounds of the surrounding area thereto as a result of any action by any dog, including my own.</p> <p>Signature of Owner or Authorized Agent: (In the case of a minor, a parent or legal guardian must sign.)</p> <p>_____ (Signature) (Date)</p> <p>Name of Owner (if different from handler): _____</p> |
| POC USE ONLY | Proof of vaccinations: _____ (Student: Please bring to class on the first night.) Rabies: _____ Session: _____ DA2 PL Parvo: _____ Class: _____ Checked by: _____ Location: _____ Remarks: _____ Instructor: _____ Application taken by: _____ Paid: (check, cash) _____ Date: _____ |