

Registration Form

I (we) agree to hold the Obedience Training Club of Greater Lansing (the "Club"), its members, directors, governors, officers, agents, superintendents, or trainers, and any employees of the aforementioned parties harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or upon the class premises or grounds or near any entrance thereto and I (we) personally assume all responsibility and liability for any such claim, and I (we) further agree to hold the aforementioned parties harmless from any claims for loss of this dog by disappearance, theft, death or otherwise, and from and from any claim for damage or injury to the dog, whether such loss, disappearance, theft, damage, or injury be caused or alleged to be caused by the negligence of the Club or any of the parties aforementioned, or by the negligence of any other person, or any other cause or causes.

I (we) also do hereby agree to be completely responsible for any damage, destruction, disturbance, or discharge by myself or the dog. I (we) also agree to potty the dog only in the area designated by the Club, and to clean up any feces or urine completely and dispose of said waste in the proper containers provided by the Club. I (we) also understand that failure to clean up after the dog in any regard will result in immediate expulsion from the Club classes and that no refund will be made if such expulsion occurs. I (we) also understand that the Club, its instructors, and Training Directors, retain the right to expel any dog which represents a danger to other dogs or people during classes. Dogs which bite will be immediately expelled and no refund will be made if such expulsion occurs.

I (WE) HEREBY AFFIRM THAT I (WE) HAVE READ AND UNDERSTAND THE FOREGOING TERMS, AND THAT I(WE) AGREE TO THEM AS A CONDITION OF PARTICIPATION IN ANY AND ALL FUNCTIONS CONDUCTED BY OR SPONSORED BY THE OBEDIENCE TRAINING CLUB OF GREATER LANSING.

Date: _____ Signed: _____

Owner/Handler

Dog's Name

Address

Dog's Breed

City State Zip

Dog's Age

Dog's Sex

(Area Code) Home Phone

(Area Code) Work Phone

E-Mail Address _____

Please use a separate registration form for each dog/class for which you are registering.

Class _____ Day of the Week _____ Time Held _____

Please mail registration form, a copy of your dog's vaccination records, and a check or money order for the full amount (made out to OTC of GL) to:

OTC of GL
3940 1/2 Grand River
Lansing, MI 48906

Class Fee _____
Discounts _____
Total Enclosed _____

NO REFUNDS. Your payment entitles you to one set of lessons for one dog.

For Club Use Only - Do Not Write In This Box

Rabies DHLP Parvo Bordetella Cash Check # _____