Stafford Dog Club Class Registration					
All classes are held at the clubhouse, 2945 Mountain View Road, Stafford, VA 22556					
interesection of Mountain View Rd-Rt 627 and Rock Hill Church Road-Rt 644					
Puppies are required to have the vaccinations appropriate for their age.					
Copies of Vaccination records and Rabies certificates must accompany each registration form with payment					
	Intecords and hables certi	incates must accom	ipany cach registration form with payment		
			the website: wwwStaffordDogClub.org		
	contracted by phone or e	mail prior to class s			
Make checks payable to:			A Copy of your dog's rabies certificate must		
Stafford Dog Club 18 Rosedale Dr	For more information: Lynne 412-445-7669		must accompany your application.		
Stafford, VA 22556			No exceptions.		
	Ken 540-		Class Start Data		
Select a class: (Please use a	(manual second s	A REAL PROPERTY OF THE REAL PR	Class Start Date		
Beginner Obedience	(7) week session	\$90.00	Sept 7th - Tues		
Advanced Obedience	(7) week session	\$80.00			
		N.			
		51			
Dog Name:	Sex	Date of birth	Veterinarian:		
Dog Breed:	Date of Last vaccination	:			
Owner Name:					
Owner Address					
			and the second sec		
Home Phone:	Cell Phone	e:	Email:		
Note: We share the facility	with several other group	s. You are respons	ible for cheaning up after your pet.		
Failure to do so will result in	n immediate dismissal fro	om class with no ref	fund. Please be courteous and scoop.		
ACDEEMEN			SSUMPTION OF RISK		
I understand that attendance o	of a dog training class of any	type is not without ris	sk to myself, family or friends who may attend, or		
my dog, because some of the d	logs to which I (we) may be $\epsilon$	exposed may be diffici	ult to control and may be the cause of injury even		
when handled with the greates	st amount of care.				
I haraby waive and release the	Staffard Dag Club barain af	tor referred to as the	Training Organization " its employees volunteers		
I hereby waive and release the <b>Stafford Dog Club</b> herein after referred to as the Training Organization," its employees, volunteers, officers, owners, members and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer,					
			the action of any dog and I expressly assume the		
			on of the Training Organization, or while on the		
			tion of and as inducement to the acceptance of my		
registration for training by this Training Organization, I hereby agree to indemnify and hold harmless this Training Organization,					
its employees, volunteers, owners, and agents from any and all claims, or claims by any member of my family or any other person					
			n, or while on the grounds or the surrounding area		
or any other location thereto a	as a result of any action by ar	ny dog, including my c			
Owner Signature:			Date:		
FOR OFFICIAL USE ONLY					
Paid by Cash					
Paid by Check					

Paid by Cash	
Paid by Check	