



STARVED ROCK KENNEL CLUB INC

Return completed form to:

STARVED ROCK KENNEL CLUB INC.

PO Box 396

Ottawa IL 61350

Ph 815-579-1151 email: sklietz@gmail.com

SHOTS OK? _____

Date _____

PLEASE PRINT:

How did you hear about us _____

Name _____

Address (and City State Zip) _____

Phone No _____ email _____

I AM REGISTERING FOR THE FOLLOWING CLASS:

___ Puppy (8wks-6mos) \$90 ___ Novice (7mo+) \$120 ___ Advanced \$90 ___ CGC (Canine Good Citizen) \$50

(Advance to any class directly following current enrolled class for a \$20 discount – no other discounts apply)

Dog's Name _____ Breed _____

Age _____ Sex _____ Has he/she been spayed/neutered? _____

Has your dog bitten or snapped at anyone? _____

Has your dog ever been aggressive toward other dogs? _____

Checks should be made out to SRKC

Class Fee _____

Credit Card _____ Cash _____ Check # _____

Deposit _____

We now accept payment via credit card. Please contact Sheila Lietz at 815-579-1151 if you would like to pay with a credit card

Misc Equipment _____

Total Amount _____

PLEASE READ BEFORE SIGNING:

Your deposit should be received at least one week prior to the first class to ensure your placement. For your dog's protection (and rest of class) current vaccination proof is MANDATORY. Please bring proof of current shots appropriate for age of dog to registration. SRKC may withdraw privileges from any person whose dog is deemed vicious or unduly unruly by the instructor. **THERE ARE NO REFUNDS AFTER CLASSES START.** At the discretion of the instructor, if student has missed several or more classes due to illness, etc. Instructor at her discretion may or may not extend credit to new classes.

WAIVER OF LIABILITY: I have read the Policies and Training Guidelines posted on SRKC webpage and this application, understand them, and agree to abide by them. For consideration of the acceptance of this registration and the said fees, I agree not to hold SRKC and the trainers liable for any loss or injury for whatever cause, which may occur upon or within the vicinity of the training facility to 1) said dog, myself or anyone handling or training my dog on my behalf and 2) to any person or thing which may be alleged to have been caused by my dog, myself or anyone handling or training my dog on my behalf. I understand that only children **10 years or older** may handle dogs and are required to have an adult present.

Student Signed _____ Date _____

Instructor Acknowledged _____ Date _____