

Welcome to the
Blanche Carlquist Training Center
K-9 Obedience Club of Jacksonville, Inc.

Paid Via _____
Shots _____

Class _____

Please provide the following information for our records so that we may better serve you. Please type or print clearly.

Name _____

Address _____

City, ST, Zip _____

Telephone # _____ E-Mail _____

Dog's Name _____ Breed _____ Date of Birth (dog) _____



Est. 1951

Training You to Train Your Dog
Since 1951
www.k9obedienceclub.org
(904) 733-2112

To aid in controlling unwanted and deadly disease, all dogs enrolled in any class must provide proof of current Rabies inoculation.

I agree that to be accepted for training, I must have a leash, training collar, and other equipment as required for the class I am enrolling in. I understand I may purchase some of these items at this facility.

I have read and understood the foregoing before signing



_____ Date _____

Signature

Date

Read Before Signing

I have enrolled myself and my dog in a training class conducted by the K-9 Obedience Club of Jacksonville, Inc., a Florida corporation not for profit. No Refunds.

I have done this voluntarily for the benefit and enjoyment of myself and my dog. I understand from the nature of the activities involved that there could be injury to myself or my dog.

I assume the risk of any injury resulting to myself or my dog in connection with this training class in so far as concerns any liability of the K-9 Obedience Club of Jacksonville, Inc.

I understand that any children who accompany me to class must be under my supervision at all times and that I am responsible for their behaving in a safe and appropriate manner. I also understand that agility equipment must not be used without prior instruction or the supervision of a qualified representative of the K-9 Obedience Club of Jacksonville, Inc.

I also hereby indemnify and agree to hold harmless, the K-9 Obedience Club of Jacksonville, Inc. against any claims for liability for damage to persons or property of others by me or my dog while on the training area or parking area by said club or property adjacent thereto.



_____ Date _____

Signature of enrollee

Date

NOTE: Parent or Guardian must sign if person is under 18 years of age.



_____ Date _____

Signature of Parent or Guardian

Date