

OBEDIENCE TRAINING CLASS OF HARRISBURG **APPLICATION FOR TRAINING**

Mailing Address
806 Baltimore Pike
Gardners, PA 17324

Phone (717) 766-1838
Voice Mail - Leave Message
www.otchpa.com

Training Facility
1 Souder Court
Mechanicsburg, PA 17050

Name of Handler _____ **Age (if under 18)** _____

Name of Owner (if different than Handler) _____ **MEMBER of OTCH? Yes ___ No ___ Pending ___**

Address _____ **Home Phone** _____

City _____ **State** _____ **Zip** _____ **Cell Phone** _____

Email Address _____

Dog's Call Name _____ **Breed** _____ **How long have you had this dog?** _____

Dog's Date of Birth _____ **Age** _____ **Sex** _____ **spayed or neutered? Yes ___ No ___ Not yet ___**

Veterinarian _____ **Rescue dog? Yes ___ No ___** **From where?** _____

Last Vaccination Dates (Proof Required Each Session) Rabies _____ DHLP _____ PARVO _____

Class Requested (sessions and instructor schedules vary and some classes may not always be available)

CIRCLE, HIGHLIGHT OR CHECK YOUR SELECTION – ONE APPLICATION REQUIRED FOR EACH CLASS

Puppy K 6 PM	Level 1 Obedience	Tricks – Nov/Int/Adv	Intermediate Scent 500 PM
Puppy K 715 PM	Level 2 Obedience	Freestyle	Advanced Scent 615 PM
Manners 6 PM	Competition Obedience	Beginner Rally	Competition Scent 730 PM
Manners 715 PM	Beyond Manners	Agility	Rally

Classes are filled on a first come/first served basis. OTCH reserves the right to withdraw a class due to too few students.

Has your dog ever shown any signs of viciousness? ___ Yes ___ No If yes, toward ___ people? ___ dogs?

OTCH Policy Regarding Dangerous Dog

OTCH or any OTCH officer or authorized representative reserves the right to dismiss or excuse any handler and /or his/her dog if the dog attempts to or does attack any person or dog. OTCH also reserves the right to dismiss or excuse any handler and/or his/her dog if the dog appears dangerous to people or to other dogs while on the club property or at any club event. The dog must be removed from the premises of the club immediately. The dog will not be allowed to return to the club or participate in any club activities until the Board of Directors has met and reviewed the issue and has given its approval for the dog to return to OTCH property. The board reserves the right to discontinue club privileges to that individual who permits uncontrollable and potentially dangerous behaviors in the club building or at club activities.

The Obedience Training Class of Harrisburg shall strive to maintain a safe and secure environment for all dogs and their owners and handlers on club grounds and at functions sponsored by the club.

AGREEMENT TO HOLD HARMLESS, WAIVER AND ASSUMPTION OF RISK

I understand that training at Obedience Training Class of Harrisburg (OTCH) with my dog is NOT without risk to me, my dog, family members or guests. In consideration of and as inducement to the acceptance of training at the OTCH Building located at 1 Souder Drive, Suite 1, Mechanicsburg, PA, I AGREE to indemnify and hold harmless OTCH, its officers, members and agents from any and all liability of any nature and from any and all claims by any member of my family or any other person accompanying me to any training session or function of OTCH for injury or damage which I or my dog may suffer. This includes specifically, but without limitation, any injury or damage resulting from the action of any dog, including my own. I expressly assume the risk of any damage or injury while attending any training session or other function of OTCH, or while on the training grounds or surrounding area thereto.

I CERTIFY THAT I AM 18 YEARS OR OLDER, THAT I HAVE READ THIS ENTIRE WAIVER, AND THAT I FULLY UNDERSTAND THE PROVISIONS OF THIS WAIVER AND INTEND TO BE LEGALLY BOUND HEREBY.

SIGNATURE _____ **DATE** _____

Signature of Owner or Authorized Agent (If handler is a minor, a Parent or Legal Guardian must sign)

REFUND POLICY: Applicant will be entitled to a refund, less a \$5 handling fee, if notice of the withdrawal from class is received by OTCH 24 hours prior to the date of the first class of the scheduled session. There will be no partial refunds.

Failure to remit payment before the session begins may result in loss of class participation.

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Office Use Only: Class _____ Amt. Paid _____ Check # _____ Cash _____
Presented Vaccination Record: Yes ___ No ___ due by Mail / Class Application taken by _____
Rescue or Senior discount given? Yes ___ No ___ \$ _____