

CONTACT ZONIES 2010-2011 AGILITY CLASS REGISTRATION FORM
(all levels except Beginners)

A hard copy of this form is required the first time you sign up for classes each year. Please circle the correct session and mail it with your check to the address below. You may sign up for subsequent sessions by notifying Candy McDougall by email and sending payment to the address at the bottom of the form. **If you are registering for a higher level course than you have previously participated in, a signed Next Course Assignment Form must be included with your registration. Course Night and Competition require approval from the Training Director. Please email Darcy Rohats at drohats@cox.net before submitting your registration.**

1st session: Sept. 26, 2011 2nd session: Nov 28, 2011 3rd session: Jan 30, 2012 4th session: Apr 2, 2012

Please complete this form for EACH DOG.

HANDLER INFORMATION

Name: _____ Home Phone: _____
 Address: _____ Work Phone: _____
 _____ Cell Phone: _____
 City: _____ State: _____ Zip Code: _____ Email: _____

DOG INFORMATION

Dog's Call Name: _____ Dog's Breed: _____
 Dog's Sex: Male Unaltered Male Neutered Dog's Date of Birth: _____
 Female Unaltered Female Spayed (if date of birth is unknown, please estimate)

Date of your dog's last vaccination for: DH-PPV or DHLPP _____ Rabies _____ Bordatella _____ Coronavirus _____
 Is your dog protected against Heartworm? Yes _____ No _____
 Approximate Height of dog at the withers (shoulders) _____ Inches
 Jump Height you will be participating in during class _____ Inches

Mark the Class you are registering for:		Class Fee	Max amt Contact Cash	Instructor Fee	List position if Board Member
<input type="checkbox"/> Novice I -16wks	Tue 7:45	\$160.00	\$110.00	\$0.00	_____
<input type="checkbox"/> Novice II	Mon 6:45	\$ 80.00	\$55.00	\$0.00	_____
<input type="checkbox"/> Advanced I	Mon 7:45	\$80.00	\$55.00	\$0.00	_____
<input type="checkbox"/> Advanced II	Wed 6:45	\$80.00	\$55.00	\$0.00	_____
<input type="checkbox"/> Handling Techniques	Wed 7:45	\$80.00	\$55.00	\$0.00	_____
<input type="checkbox"/> Competition	Thur 6:45	\$80.00	\$55.00	\$0.00	_____
<input type="checkbox"/> Course Night	Thur 7:45	\$80.00	\$55.00	\$0.00	_____

- I understand that this application is not complete without a current waiver attached.
- I give Contact Zonies, Ltd. permission to publish my name, address, phone number and email address for Board Members, Teachers, and Club Members: Yes _____ No _____
- Students are expected to assist in the set up of equipment for class. Please plan to arrive 15 minutes before the time listed above to help set up and get your dog situated. Remember many hands make light work!
- Please check any areas in which you might be interested in volunteering - we love our volunteers!!
 - Helping out at Agility Trials -earn Contact Cash to put toward lesson fees
 - Helping at Equipment Days -earn Contact Cash to put toward lesson fees
 - Becoming a teacher's asst -earn Contact Cash to put toward lesson fees
 - Becoming a teacher -receive one free session for every session taught

Amount of Contact Cash Enclosed \$ _____ Amount of Check Enclosed \$ _____

Make Checks Payable to: **Contact Zonies, Ltd.** Mail Registration with payment to:

Candy McDougall
 4302 E. Fanfol Dr.
 Phoenix, AZ 85028
 Candymac1@cox.net

NAME (last, first)

 (for club use only)

CONTACT ZONIES, LTD.

STATEMENT OF RESPONSIBILITY & WAIVER OF LIABILITY

I understand that agility training is an activity that is held at a designated training site in the presence of other dogs and their owners. I also understand that the participation of my dog and myself in the agility training will require physical activity on my part and on the part of my dog. I also understand that this activity will involve running, jumping, and use of obstacles such as scaffolding, tunnels, teeter totter, scaling planks, obedience, wing or other jumps, and rubber tires which could result in injury to myself, to my dog, or others.

I represent that I am in good health, and my dog is in good health, and we are both in adequate physical condition to participate in the sport of agility. I further represent that my dog is friendly and not a hazard to other persons or dogs; that I will examine the equipment provided for the class, along with the premises, prior to permitting my dog to engage in agility activities; and that I will participate at my own risk and that I will not hold Contact Zonies, Ltd., agility club, its board of directors, the agility instruction staff, the owners of the training site or any and all persons or entities associated with Contact Zonies, Ltd., agility club, liable for any loss, injury, illness, expense or further agree to assume full responsibility and liability for any and all injury or damage caused in any way by my dog(s) or myself.

Print your name here: _____

Signature of owner: _____

Signature of guardian if handler is a minor: _____

(A responsible adult must accompany minors during class) Date of signature:

STATEMENT OF RESPONSIBILITY AND WAIVER OF LIABILITY is valid from date of signature to **August 31, 2012.**

NAME (last, first)
(for club use only)
