



LOUISIANA CAPITAL CITY OBEDIENCE CLUB

REGISTRATION FORM

Please check the class you are signing up for

Puppy: _____ Novice: _____
Beginners: _____ Utility/Open: _____
Adv. Beginners: _____ Rally: _____
Special Class: _____ (Specify) _____

CONTACT INFORMATION

Handlers Name: _____
Street Address: _____
City: _____ Zip: _____
Primary Phone: _____ Alternate Phone: _____
Email: _____

Children under the age of 9 are not allowed to train unless they are able to control the dog to the instructor's satisfaction, otherwise the parent must handle the dog. If the handler is under the age of 18, Parent or Guardian must provide consent below:

Name - Parent/Guardian: _____
Address: _____
Signature: _____

DOG INFORMATION

Breed: _____ AKC Registered? _____
Name: _____ Age: _____
Have you ever taken an obedience class before? Yes: _____ No: _____
If so, where? _____
What is your goal/Why are you taking these classes? _____

Other problem or reason for training: _____

I do hereby release the LOUISIANA CAPITAL CITY OBEDIENCE CLUB (LCCOC) and BLUE CROSS from any and all responsibility or liability for any injury to person or dog that may occur on the training premises or otherwise in connection with LCCOC classes or activities.

I understand that no refunds will be given after Week 2 of the session, but if I must drop out of class for any reason prior to Week 3, I can return for the next session at no charge. If attending the Puppy or Beginner class and I am not satisfied with my dog's progress, I may register for, and attend one of the next two sessions. After that time, I will be charged the regular fee and will not be able to repeat a class at no charge.

Do you give permission for LCCOC to use photos taken at classes and events for publicity purposes on our website, social media, and newsletters? (Please check one) YES NO

SIGNATURE: _____ DATE: _____

For LCCOC Club Members:

I certify that I am a member in good standing, and that I have worked the necessary number of volunteer hours to obtain free obedience classes.

SIGNATURE: _____ DATE: _____