

4RK9's Dog Training Club Obedience Class Registration Checklist

www.4RK9s.com 319-366-5668

Make sure you remember to:

- $\hfill\Box$ Fill out and sign registration form below.
- ☐ Include check **PAYABLE TO 4RK9s** for class.
- □ Include a copy of your latest vaccination certificates for rabies AND parvo AND distemper shots from veterinarian. These records are required by rules of the State of Iowa and you <u>must submit a copy even if you have submitted one for previous classes</u>. For vaccination certificates for puppies, see section below.

Send Registration Information to:

Marie Appel 4RK9s Obedience Coordinator 200 North Oak Street Mechanicsville IA 52306

Address above is only to send Registration Information.

Address for Classes:

4RK9s 910 2nd Ave SW Cedar Rapids, IA 52404

Ways to Fill out Registration

- 1 You can print this blank form and fill it out by hand and sign.
- 2 Some Browsers will let you fill it out while viewing on your computer. Once filled out; print and sign.
- 3 You can download and save and use Adobe Reader to fill out then print and potentially save.



4RK9's Dog Training Club Iowa Animal Welfare License #9437

Obedience Class Registration Form

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INSTRUCTIONS

Complete this form and mail together with a check for the class fee payable to 4RK9s Dog Training Club and copies of vaccination certificates for rabies, parvo and distemper to:

> Lisa Fuglaar 4RK9s Obedience Coordinator 200 North Oak Street Mechanicsville IA 52306

Class size is limited to provide ample attention to each handler and dog. Register early! Your payment will reserve your spot in the class. You will be contacted immediately if the class is full. You will receive a reminder approximately one week prior to the start of your class.

Bring to class: a 6 ft leather (preferred) leash, lots of soft training treats, a water bowl, and a positive attitude! NO FLEXI-LEADS are

allowed for o	class training.			
	<u>Class</u> 6 Week Class 4 Week Class	FEE SCHEDULE Member Price \$90.00 \$60.00	Non-Member/Inactive Member Price \$120.00 \$80.00	
Class Title:			Class Start Date:	
Handler's N	lame:		Dog's Name:	
Street Address:		City:		State: ZIP:
Phone: E-Mail :				
Most instructors prefer an e-mail address for communication with students pertaining to the class and for class confirmation. Please				
indicate if you require telephone				
Breed:		DOB:	Sex (M/F):	Spayed/Neutered:
Is your dog a rescue? How long have you had your dog?				
What do you hope to accomplish through this class?				
What previous dog training experience do you and/or your dog have (recent classes taken)?				
Please list any food allergies your dog may have.				
How did you find out about this class?				
Please check here if you do not wish us to take photos of your dog.				
Please check here if you do not wish to receive email information from the club at the conclusion of this class. VACCINATION CERTIFICATES				
You MUST provide a copy of your rabies and distemper combo (distemper and parvo) vaccination together with this form regardless of how many previous classes you have attended at 4RK9s. This information is required by regulations of the State of Iowa.				
FOR PUPPIES ONLY: If you have a puppy that has begun his/her series of vaccinations, but has not yet received a RABIES vaccination, include the information for the "distemper combo" vaccinations received to date and bring a copy of the remaining vaccination certificates when you receive them from your Veterinarian.				
Date of Mos	st recent Rabies Vaccination:		Date Next Due:	
Date of Mos Virus Vaccii	st recent Distemper and Parvo nation:		Date Next Due:	
LIABILITY WAIVER I agree by my signature to hold 4RK9's, its members, directors, officers, the owner of the premises used for training, and any party or employee of the aforementioned parties, harmless from any claim or loss which may be alleged to have been caused directly or indirectly to any person, animal or things by this dog while in or upon the premises or near the entrance thereto.				
I personally assume all responsibility and liability for any such claim. I further agree to hold aforementioned parties harmless for any such claim for the loss of this dog due to disappearance, theft, damage or injury or any other causes. I am solely responsible for my children's safety and welfare as well as their supervision during the entire time they are present on the training grounds. To the best of my knowledge this dog is free of any contagious or potentially contagious diseases.				
TO THE DOSE	or my knowledge tills dog is liee	or any contagious or potentially co	magious discases.	
Signature:				Date: