# **NEW CLASS APPLICATION FORM**

**OWNERS NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSTAL CODE \_\_\_\_\_\_\_\_\_\_\_\_**

**HOME PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WORK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BREED OF DOG \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VACCINE: Y / N SEX \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOGS NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE \_\_\_\_\_\_\_\_ SPAY/NEUTER \_\_\_\_\_\_\_\_\_\_**

**HAVE YOU ATTENDED ANY TYPE OF CLASSES WITH THIS DOG LIST WHAT CLASSES?**

**HOW DID YOU HEAR ABOUT US?**

**HAVE YOU TRAINED ANY OTHER DOG? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE & LOCATION OF CLASS YOU WOULD LIKE TO ATTEND. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PAYMENT INFORMATION**

 Visa MC Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date \_\_\_\_\_\_\_

 E-Transfer

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## Conditions of Participation

 The Calgary Canine Centre has found it necessary to create a few conditions to ensure the safety of all participants. These conditions will be exercised solely upon the discretion of your instructors, and in the event they are exercised, cost of your classes will be refunded.

1. The dog is at risk of physical injury due to its physical structure or condition.
2. The dog demonstrates a temperament/behavior that poses a threat to itself, other

dogs or handlers.

1. The handler behaves in a manner that causes any risk of harm to themselves, their

dog, other handlers or other dogs.

I do hereby accept the rules and conditions of participation in The Calgary Canine Centre classes, and agree to abide by same. I waive and release The Calgary Canine Centre, Cedarbrae Community League Association, Navigator Ranch their owners, employees, instructors and/or assistants, and any and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I understand that I must not attend classes if I have knowingly been in close or proximate contact within the last 14 days with anyone who has tested positive or who has symptoms of COVID-19, tested positive myself for COVID 19 in the last 14 days, or have experienced the symptoms of COVID-19 in the last 14 days.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_