

PHILADELPHIA DOG TRAINING CLUB

A non-profit organization founded in 1938

MEMBER: AMERICAN KENNEL CLUB

MEMBER: PENNSYLVANIA FEDERATION OF DOG CLUBS

APPLICATION FOR 8 WEEKS OF TRAINING

(This application is for participants who *DID NOT* complete Basic Beginners' Class at Philadelphia Dog Training Club, Inc.)

Training Director: Barbara Doering :: Instructor: Paulette McBride

Classes are held at St Aloysius Academy

401 S. Bryn Mawr Av. Bryn Mawr, PA 19010

Owner' Name: _____ Home #: () _____

Address: _____ Work #: () _____

City, State, Zip: _____ Cell #: () _____

Email: _____

Dog's Name: _____ Breed/Mix: _____

Age of Dog: ____ years ____ months Sex of Dog: Male / Female

Organization/Trainer where Beginners' Class was completed: _____

Date that Beginners' Class was completed: _____

Other Training completed (e.g., advanced obedience or other performance activities):

() **Pre-Novice (Post-Beginner)**

How did you hear about PDTC? _____

The \$120.00 fee payable to the Philadelphia Dog Training Club, Inc. must accompany your application.

Mail checks to: C. Allen 209 N. Deerwood Dr. West Chester, PA 19382.

APPLICANTS PLEASE NOTE: Upon completion of 8 weeks of training you are eligible to apply for membership to Philadelphia dog Training Club, Inc.

WAIVER

I certify that I have no current or pending disciplinary actions with the American Kennel Club and that I will abide by the rules and regulations of the Training Classes and Constitution and By-Laws of the Philadelphia Dog Training Club, Inc. (Hereafter PDTC). I waive and release PDTC and St. Aloysius Academy, (SAA), their employees, members, volunteers, and directors from any and all liability of any nature for injury or damage which I or my dog may suffer while attending any training session or other function of this training facility or while on the training grounds or surrounding areas. Upon acceptance of my application I agree to indemnify and hold harmless PDTC and SAA, their employees, members, volunteers and directors from any and all claims of injury or damage by any member of my family or any other person accompanying me to any training session or function of this training facility or while on the training grounds or the surrounding area. I hereby give PDTC permission to use my name & any photograph of me and or my dog in any way it deems appropriate for informational and training purposes relating to PDTC activities. Such use by PDTC includes, but is not limited to, use in its newsletter or any other publications, use in newspaper or magazine articles about PDTC, use in videos or on web pages or internet sites for training or informational purposes concerning PDTC, or use in any other written or non-written informational materials concerning PDTC and its activities.

Printed Name: _____ Signature: _____ Date: __/__/__

ALL ITEMS MUST BE COMPLETED, FORM SIGNED & PAYMENT RECEIVED FOR REGISTRATION TO BE PROCESSED. REFUNDS PRIOR TO STARTING DATE ARE SUBJECT TO \$25 PROCESSING FEE.

8 Week App advanced non PDTC (08252011)