

Go Dogs! Inc.

APPLICATION FOR FLYBALL CLASS



Name of Class: **Beginners & Advanced (combined)**
Starting Date: **April 9, 2006, 3-4 pm**
Cost of Class: **\$50.00 plus \$3.50 tax = \$53.50 (Beginners, members)**
..... **\$60.00 plus \$4.20 tax = \$64.20 (Beginners, non-members)**
..... **\$40.00 plus \$2.80 tax = \$42.80 (Advanced, members)**
..... **\$50.00 plus \$3.50 tax = \$53.50 (Advanced, non-members)**
Length of classes: **6 weeks**

This application must be filled out and returned to Crystal Kuhns at the address below along with your check made payable to GO DOGS! INC. Due to the amount of setup and space required, class is limited and applications will be accepted on a first received basis. If class is filled, your check will be returned to you. Once classes have begun, no refund of fees shall be made unless request is made in writing to the board of directors of GO DOGS! INC. Please note that monies for class will not be deposited until class starts.

- Only one handler should train the dog throughout the class.
- Children under the age of fourteen will be allowed to train only with the approval of the training director.
- Aggressive dogs will not be accepted into our group classes, but will be referred for private instruction.
- No abuse of dogs will be tolerated in our classes.

SEND APPLICATION TO: Crystal Kuhns, 2708 Chestnut St, Atlantic, IA 50022.

If you have any questions, please send e-mail to ckuhns@amvcms.com or call Crystal at 712-250-0254.

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(Tear here and return bottom portion with payment.)

Class level for which you are applying: Beginners _____ Advanced _____

Handler's Name: _____ Phone: _____

Address: _____ Zip Code: _____

Dog's Name: _____ Dog's Date of Birth: _____

Breed of Dog: _____ Sex = M _____ Neutered? _____ F _____ Spayed? _____

E-mail Address: _____

Handler's Name (if different from owner's) _____

I understand that attendance in dog training classes is not without risk to me or my dog. I hereby release Go Dogs! II Inc., its instructors, agents, employees, heirs or assignees, along with the property owner, from all responsibility or liability of any form or description for any and all injuries or damages sustained by myself, my dog, or any member of my family, or any other person accompanying me to any training session or function or while on the grounds. I also state that my dog has been inoculated for rabies, hepatitis, distemper and parvo.

Owner's signature: _____ Date: _____

*****Please be sure to enclose payment with bottom portion*****