

## OKPAWS K9 Sports Club CLASS APPLICATION

Applicant's Name:				
Street Address:				
Mailing Address:				
City:		State:	Zip Code:	
Home Phone:	Office Phone:		Cell #:	
Email Address:				
Previous Training Experience:				
Dog's Name:	Breed:		Age:	spay/neutered?
Class Name:				
Best way to Contact: Home Ph#	Cell Ph#	Email	Text	
How did you hear about this class?				
Fees for other classes (Flyball, Disc I will be discussed when needed  Has the above named dog ever bitten  If yes, please explain the circumstance	a person or and		at time of planning a	and
The undersigned hereby makes applic under the rules of the United Kennel ( the club, the applicant agrees to the fo	Club. In addition	•	-	-
WAIVER, ASSUMPTION I, the undersigned, intending to be leadministrators do hereby waive and notes its Administration, Directors, and oth competition or training event. I also assume full responsibility for injury of Rabies vaccination by a veterinarian	egally bound, velease all right ner members for attest and can or damage caus	vith regard to is, claims and or any injury o verify my do sed by me or n	myself, my heirs, ex damages against Ok r illness incurred by g's fitness to particip	ecutors and KPAWS K9 Sports Club, me or my dog at any dog oate at said activities and
Applicant's Signature:			Date:	
Paid by: Cash Check #:				