

**** APPLICATION FOR TRAINING CLASS ****

-----Circle Choice of Class Location Below-----

North Spring Class - March 30, 2010 ‹—or—› **South Fall Class - April 08, 2010**

-----Check Choice of Class Below-----

Puppy Obedience (3-5 months); **Basic Obedience Class** (6 months & over)
 Advanced/CGC*; **Rally Class*** **Competition Class*** (*Basic is a prerequisite*)*

First class - \$75; Second Class for same dog - \$65

Amount paid: Cash (\$_____) Check #_____ (\$_____) Rec'd by:_____ Date:_____

Name:_____ Spouse:_____

Address:_____

City/State/Zip:_____

Home Telephone Number: _____ Can we leave a message? _____

Can we call you at work? _____ If so, Work Number: _____ Ext. _____

Employed by: _____ Occupation: _____

Dog's Name: _____ M or F: _____ Date of Birth: _____

Breed: _____ Weight: _____

(if mixed breed, please give mix)

Person Training The Enrolled Dog: _____ (only one person can train during this 9-week period).

I learned of the classes by: Brochure _____; Newspaper _____; Previous Class _____; Telephone Listing _____; Vet _____;

Other (identify) _____; JOTC Member or Friend (give name): _____.

What are your expectations of this class? _____

At this time, is there a situation or condition in your life or anything regarding your dog that we need to be aware of in order to better assist you through the nine weeks of training? _____

_____. (The above comments will be not be shared with anyone other than your instructor.)

(1) I agree to adhere to the training rules and regulations of the Jackson Obedience Training Club, Inc. as attached. (2) I accept the responsibilities of my dog during the time I am participating in training classes. (3) I further agree that I hereby release and waive any right that I may have at law, to hold the Jackson Obedience Training Club, Inc. its members, instructors, agents and officers, and/or the owner of the premises, liable for any injury which occurs to me or to my dog, dogs or other property.

Signed: _____ Date: _____

If under 18 years of age, signature of guardian: _____

*Advanced/CGC Class and Competition Class must have a minimum of seven dogs signed up and requires that the dog has completed a JOTC Basic Obedience Class, other than Pet Manners, Puppy, or Intro Class. Advanced Class will be offered at the North (Ridgeland) location only. Rally and Competition classes will be offered at the South location only. North Class is held at Old Trace Park on Post Road in Ridgeland. South Class is held at the Closed Home Depot location at 4704 Robinson Road Extension in Jackson.

JACKSON OBEDIENCE TRAINING CLUB, INC. Rules and Regulations for Dog Training Class

Please read and direct any questions to the registrar or your instructor.

Wolves and/or wolf-hybrids are not allowed in training classes or at the training sites as per JOTC Board of Directors, 1993.

1. Pre-registration required. Mail application, vaccination verification and payment (no less than six days before class begins) to: **JOTC Post Office Box 193 Jackson, MS 39205.** ***This lead time is necessary so that we can get the paperwork completed and a confirmation letter to you with additional class information and be sure that we have enough of instructors.) If you have missed the mail-in deadline and need to get into the class, please call MaryJo at 601.371.4456 (leave message). A late fee of \$10 will be charged for applications received after the deadline.***
2. All dogs must be transported to class in a safe manner. No dog shall ride loose in the bed of a pickup (unless covered) or in a vehicle that would allow the dog to jump out. By no means shall a dog be transported in the trunk of a car.
3. No dog will be allowed in class without a proper collar and a six foot flat style leash - leather is preferred. Flexi's, retractables, chains, ropes or round styles and other make-shift leashes will not be tolerated.
4. Be on time for the class as indicated in your confirmation letter.
5. You must attend training sessions to receive the homework sheets.
6. Bring water and bowl for dog and treats to be used in training.
7. No dog will be allowed off leash. Keep a firm hold of your leash.
8. If your dog relieves itself in any manner, you must clean it up. Bring plastic bags.
9. No dog will be allowed to bark or otherwise cause a disturbance without being properly corrected.
10. Failure to keep your dog under control or failure to praise and correct as required by your instructor may result in the dog and/or handler being barred from the premises.
11. No dog will be allowed to threaten or charge other dogs or people without being properly corrected.
12. Dogs not registered in class will not be allowed at the training site without prior approval of the training director and will be subject to all rules of conduct and health requirements.
13. Conversation should not take place between students during the instructor's explanations and demonstrations.
14. You must train at home to get results.
15. No smoking in class or alcoholic beverages on the training site at any time.
16. Maintain a safe distance between dogs, approximately six feet or as designated by your instructor.
17. No student shall leave a dog unattended.
18. Bitches in season will not be allowed to attend the class but the owner should attend.
19. In order to graduate, you must attend at least five of the nine classes.
20. If in the opinion of your instructor, your dog is not qualified, you will not graduate.
21. Cell Phones should be left in your vehicle during training classes.

I, the undersigned, acknowledge that I have read and agree to the above rules and regulations to attend this training class.

Date

Name

JACKSON OBEDIENCE TRAINING CLUB, INC.
Post Office Box 193 Jackson, MS 39205
Telephone (Leave Message): 601.352-DOGS (3647)

*****Vaccination Verification*****
(Please print legibly. Fill out all items.)

Name: _____ Spouse: _____

Address: _____

City/State/Zip: _____

Telephones (Home) _____ (Work) _____ (Cell) _____

Dog's Name: _____ Date of Birth: _____

Breed: _____ Sex: _____ Weight: _____
(If a mixed breed, give mix.)

1. **Mandatory Vaccination: Must be administered by a licensed veterinarian.**

Rabies _____ Tag No. _____ (Attach, mail or deliver a paper copy of
Date rabies certificate with this application.)

2. **Strongly Recommended Vaccinations: (Indicate latest date of vaccination.)**

Bordetella _____

Coronavirus _____

Distemper _____

Hepatitis _____

Leptospirosis _____

Parainfluenza _____

Parvovirus _____

Clinic Name: _____

Address: _____
