



# LINCOLNWOOD TRAINING CLUB APPLICATION

NAME: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Sex: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Birthday: \_\_\_\_\_ BREED: \_\_\_\_\_

Phone: \_\_\_\_\_

## *Obedience Classes \$100 for 8 weeks*

E-Mail: \_\_\_\_\_

Puppy

Beginners

Is the person who will be training the dog under 18 years old: \_\_\_\_\_

CGC/TDI

Advanced Obedience \*

If yes, name: \_\_\_\_\_ Age: \_\_\_\_\_

Rally

\* Director of Training approval needed

## **Early registration is strongly suggested as class size is limited!**

- ❶ Make checks payable to: **Lincolnwood Training Club** (all checks will be held until the start of the class)
- ❷ Send completed application, copy of current vaccination record, copy of dogs registration or adoption paper along with a check payable to LTC.
- ❸ Mail to Mary Even DOT, 315 Fernwood Lane, Glenview, IL 60025  
For additional information call (847) 729-1719, visit [www.ltcgsd.org](http://www.ltcgsd.org) or email [obedience@ltcgsd.org](mailto:obedience@ltcgsd.org)

### Class Rules:

- You are responsible for the behavior of your dog at all times. Dogs must be on leash when waiting their turn. Aggression towards people or other dogs is not acceptable. Always give unfamiliar dogs plenty of space.
- Walk your dog in the "Duty Area" prior to class. Do not let your dog urinate on any of the equipment. If your dog potties on any part of the field, please clean it up immediately and thoroughly.
- Choke collars and prong collars should be avoided during agility training. For safety reasons, flat buckle collars and leashes or loopless tabs are best for agility.
- Absolutely no abusive behavior toward any dog, handler or instructor will be tolerated.

### GENERAL RELEASE

I, the undersigned, as the owner/handler or the owner's representative of the dog(s) known as \_\_\_\_\_, Do hereby release and hold harmless, Lincolnwood Training Club, Inc. for German Shepherd Dogs and all their training staff, officers, agents, associates and all persons connected therewith, from any and all liability, claims, or causes of action which may arise from any and all participation in dog training or other related activities performed by the above referenced individual(s). I assume full responsibility for the actions of the above referenced dog(s) and any resultant consequences of those actions throughout the entire course of the instruction and other related activities. This release extends and applies to my agents, heirs and other persons of interests to all liabilities, injuries, damages, losses as well as any consequence thereof. I have read this release and evidence my understanding of its terms, conditions and consequences by executing this document below. In doing so, I agree to be bound by its terms and conditions contained herein. I also understand that aggressive behavior on the part of my dog(s) toward any person or other dog will result in dismissal from class, repeated aggression will result in permanent dismissal from the program with no refund of training fee.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Club Use only:

Class Assigned: _____	Class Dates: _____	<input type="checkbox"/> Health Record	<input type="checkbox"/> Registration/adoption papers
Instructor: _____			
Amount Paid: \$ _____	<input type="checkbox"/> Cash	<input type="checkbox"/> Check # _____	<input type="checkbox"/> Receipt # _____
Applied for membership: <input type="checkbox"/> If not, why? _____			
Applied for Guest Training Membership: <input type="checkbox"/> If not, why? _____			