



Clermont County Dog Training Club Class Registration

www.ccdtc.org

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____ Cell: _____ E-Mail: _____

Name of Class _____ Start Date: _____ Start Time: _____

Dog's Name: _____ Breed: _____ Age: _____

Class Type	Cost	Quantity	Total	Records Enclosed	Records on File
7 & 8 Week Non Member	\$105.00				
6 Week Non Member	\$ 90.00				
7-8 Week Non Member-2 nd session	\$95.00				
6 Week Non Member-2 nd session	\$75.00				
Member fee all sessions	\$15.00				
Checks payable to CCDTC					

Shot Records

A signed statement from your vet that your dog has all the vaccinations that your breed requires and is current and your dog is in good health. Call if you have questions: (513) 238-7040 or email either the obedience registrar at ccdteobregistrar@gmail.com or the agility registrar at seadragon80@aol.com

Release

I hereby release and agree to hold harmless the Clermont County Dog Training Club Inc., its instructors, trustees and officers from any personal injury or damage or injury to any dog owned by me, including any liability, cost or expenses associated with the foregoing, arising-out-of, or during training classes sponsored by CCDTC, inc.

In addition, I understand that it is my responsibility as a trainee to keep my dog(s) under control at all times before, during, and after classes, and to refrain from the use of harsh or abusive training methods at any CCDTC Inc. activity. Failure to comply with the above may result in loss of training privileges and forfeiture of monies paid.

Signature of trainee **Note: If trainee is a minor, then parent or guardian must sign.** Date: _____

Class confirmations will be e-mailed or mailed shortly before starting date.
Dogs come first night Brings small treats No Flexie leads allowed in the building

How did you hear about our training classes? __newspaper __veterinarian __friend __other_____

*****For Office use Only

Mail completed form and records to:
CCDTC Registrar (please list either obedience or agility)
Amy Sperry, 2010 Plumb Lane
Batavia, OH 45103
(Checks payable to CCDTC)

Health certificate received _____

Fee received _____