## Clermont County Dog Training Club, Inc. New Membership Application Form

Please print or type for readability. This is a two-page document and signatures on page 2 are required for a valid application. <u>DO NOT SEND \$ with application.</u> Your dues will be pro-rated according to month you join!

Name(s) first and last: (Adults)			
(Children under 18)			
Address			
City	State	Zip	
Phone (s): Preferred:	Alternate/Spou	use:	
E-Mail (s)			_
Dog Breed(s)			
I(we) certify that any dog /we bring to the CC	DTC building is healthy ar	nd appropriately vaccinated	<i>I.</i>
(all adults must Initial)			
(By Laws and vaccination requirements at: https://doi.org/10.1001/journal.com/html/10.1001/journ	ttps://www.ccdtc.org/memb	ber-information.html )	
Please check type of membership requested			
Single: (1 adult over 18) Dues \$45.	.00 ( requires 16 service h	nours)	
Single Senior: (1 adult 60 years or old	ler) Dues \$41.00 (requi	ires 16 service hours)	
Family: (at most 2 adults and children be a parent or legal guardian if the other mer service hours)			
Family Senior: (2 adults 60 years or o	lder) Dues \$50.00 (req	uires 22 service hours)	
Family Junior: (1 adult with children ur	nder 18 years old) Dues	s \$45.00 (requires 16 servi	ce hours)
CCDTC's membership year runs Oct. 1 throumember is voted into membership.	ugh Sept. 30 <sup>th</sup> . Dues are c	calculated from the date a n	ew
Cleaning fee assessed to all members: \$20 s <u>DO NOT SEND \$ with application. You</u>		l according to month you	<u>ioin!</u>
	nip ♦ 6058 Kells Lane ♦		
Class:lı	nstructor	Start Date	
Class:lı	nstructor	Start Date	
Date of the general membership meeting you	u attended:		

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I hereby release and agree to hold harmless the Clermont County Dog Training Club, Inc., its instructors, trustees and officers from personal injury, damages or injury to myself, my family, or any dog owned by me; including any liability, cost or expenses associated with the foregoing, arising out of, or during training classes or other activities sponsored by CCDTC, Inc. In addition, I understand that it is my responsibility to keep my dog(s) under control at all times before, during, and after classes or events, and to refrain from harsh or abusive training methods at any CCDTC, Inc. activity.  **All adult Members must provide release signature(s):**
oonsorship Signatures. May be any two (2) members.
s a member in good standing of the Clermont County Dog Training Club I Hereby sponsor the above oplicant(s) for membership.
ponsor #1
ponsor #2
we have read and understood the By-Laws and Standing Rules of the club, as posted on the ub website (https://www.ccdtc.org/member-information.html)) (please initial): (please initial):
promise to carry out the responsibilities and obligations described in the By-Laws and Standing ules of the club.
Date:
oplicant(s) Signature(s)
Date: oplicant(s) Signature(s)
,priodrik(o) olgitataro(o)
Date rec'd
Check # & amt: Date Published in Howler: Date voted in: