



AKARANA DOG TRAINING CLUB Incorporated
Founded 1960
Associated to New Zealand Kennel Club Incorporated

101 Obedience Enrolment Form

Name: _____

Street: _____

Suburb & City: _____

Telephone: _____ Mobile Phone: _____

Email: _____

Dogs name: _____ Breed: _____

Dogs D.O.B: _____ Sex: _____

I agree that my dog has been fully vaccinated and if need be can produce proof of this should it be requested. My dog will be kept under supervision and on leash at all times unless instructed otherwise. Children under the age of 15 years must have parent supervision while completing the course.

I agree to have "My Vaccine Pass" verified and anyone who will be with me.

I will inform the trainer(s) if my dog has any nervous tendencies, mouthing or issues that may be interpreted as aggression. Should any incident occur due to the fault of my dog I will be responsible for all costs incurred to any dog or any handler.

I will notify the club if my dog has a menacing/dangerous dog order (or similar order issued by any local authority) issued against him/her at any time during my temporary membership.

Signed: _____ Date: _____

While all possible care and attention is taken, Akarana Dog Training Club accepts no liability for any injury or damage caused to handlers, their animals, or any third party.