

# Jasper County 4-H Dog Obedience

20\_\_\_\_ Training Registration

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Dog's Name \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_

Sex M / F Has dog been previously trained? Y / N Where? \_\_\_\_\_

In class, the dog will be handled by \_\_\_\_\_

## Release

I hereby make application to enter myself and the above named dog in the Jasper County 4-H Dog Obedience project. I agree to abide by all the rules and regulations of Jasper County 4-H Dog Obedience project. I will faithfully carry out the recommendations of the instructors and train my dog to the best of my ability, attend classes regularly, and do as much additional training of my dog between classes as may be recommended by the instructors.

I agree not to hold the 4-H Dog Obedience instructors, 4-H Council, Extension Personnel, Fair Association, or County Commissioners responsible in any way for loss or harm to my dog or myself from injury. I also agree to be responsible for my own dog if injury is caused by my dog to any other dog or any person while in this training.

If my dog is sick, I agree to leave it at home, but I will attend classes and get the lesson for that week.

I agree that I will withdraw from training classes if I do not follow directions in the training program or will be dismissed for hitting or kicking my dog at any time, or for the use of a spiked collar.

I have read and accepted the conditions of this release. Furthermore, I understand my dog's Certification of Vaccination from a licensed veterinarian must accompany my dog and me to training classes and dog shows.

Date \_\_\_\_\_ Signature of 4-H member \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_

Office use only: Certificate of Vaccination complete? Y / N

Project Level \_\_\_\_\_