



## 2015 Open/Utility Competition Obedience Class Registration Form

**Location:** Auke Bay Covered Playground (behind Auke Bay School)  
**Dates:** 8 classes: May 16, 23, 30, June 6, 20, 27, July 11, 18 Class time: 10 a.m.-11 a.m.  
**Instructor:** Pat Kalbaugh  
**Cost:** Class: \$ 110 for non-members; \$ 60 for CKCoJ members  
**Details:** Open and Utility exercises will be emphasized. Prerequisite: Previous enrollment in the competition class, novice obedience title (handler) or permission of instructor.

**More Info:** Pat Kalbaugh - [pakalbaugh@gmail.com](mailto:pakalbaugh@gmail.com) Note: No class on June 13 and July 4, 2015

### About You (the Handler):

Name		Age (if under 18)
Mailing Address		
email	Phone	Days <span style="margin-left: 100px;">Evenings</span>

### About Your Dog:

Name		Breed		
Age	How long owned?	Sex	Spayed/Neutered?	Shots current?
<i>Where did you get your dog? (breeder, GHS, pet store, friend, etc.)</i> <i>Are there any specific problems you are having or questions that you'd like to see addressed?</i>				
<b>PAYMENT:</b>		Make check payable to: <b>Capital Kennel Club of Juneau</b>		
Amount Enclosed \$ _____		Send payment to: Pat Kalbaugh, PO Box 34054, Juneau 99803		

### CAPITAL KENNEL CLUB OF JUNEAU WAIVER OF LIABILITY

I understand participating in events held or sponsored by the Capital Kennel Club of Juneau may include potentially hazardous activities. I assume all risks, which include falls, contact with other participants, the weather, the road or trail conditions and traffic. I assume all risks associated with participating in any/all events held or sponsored by the Capital Kennel Club of Juneau. I hereby release the Capital Kennel Club of Juneau of any and all responsibility for damage or personal injury that may occur as a result of participating in an event.

I also certify and represent that my dog(s) is/are not a hazard to other dogs or persons, is/are current on all puppy and booster vaccinations, and rabies vaccinations according to state law. My dog(s) is/are in good health. I accept personal responsibility for any and all actions my dog(s) makes.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Any handler under age 18 must have the permission and signature of a parent or guardian. Capital Kennel Club reserves the right to reschedule or adjust any class without notice. However, every attempt will be made to contact you in this event.