

CANINE AGILITY TEAM APPLICATION FOR MEMBERSHIP

Completed form is to be returned to the Treasurer with appropriate fee. Annual dues for new applicants: individual \$20; family \$35; junior \$10; new members accepted in July through December pay half of the annual dues. Applicant must participate in a minimum of two club training sessions, attend one club meeting, and be sponsored by two members in good standing before the application will be presented for vote.

Applicant's Name: _____ Address: _____

Home Phone: () _____ City _____ State _____ Zip _____

Work Phone : () _____ E-mail Address: _____

Okay to print work and e-mail address on roster? Yes No

Dog's Name _____ Breed _____ Age _____ Rabies Expiration Date _____

Dog's Name _____ Breed _____ Age _____ Rabies Expiration Date _____

If the dog belongs to another person, place an * next to the dog's name and have the owner sign below.

I agree to the following conditions: Canine Agility Team and its membership will assume no liability for any injury to me or my dog during training, practices, exhibitions, demonstrations, competitions, or any other club related activities. In signing this membership agreement, I hereby release Canine Agility Team and its membership from any and all claims and liabilities of every nature which might arise from my dog's participation in the club, or from any other cause. As a member of Canine Agility Team, I agree to abide by the Bylaws and Standing Rules of the club and will try and do my part in helping at Club sponsored activities.

Applicant's Signature _____ Date _____

***Owner's Signature** (if other than Applicant) _____ Date _____

Owner's Printed Name _____ Home Phone: () _____ Date: _____

Date of 1st Training session _____ Date of 2nd Training Session _____ Date of Meeting Attended _____

Sponsor's Signature #1 _____ **#2** _____

Club Use Only: Dues \$ _____ Date Paid _____