

OLD COLONY DOG TRAINING

Old Colony Obedience Club * Est. 1949 * Old Colony Agility Club

Membership Form (New and Renew)

For Period from January 1, _____ to December 31, _____

Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Telephone: () _____

Breed(s): _____ No. of dogs: _____

Single \$10.00 / Family \$15.00

Sign waiver and return this form to Beth Perron, Secretary

Or mail to 5 Labor-in-Vain Road, Ipswich, MA 01938

Checks should be made out to: "Old Colony Dog Training"

I recognize that attendance at any dog activity involves inherent risks and dangers to myself, family, guests, others, and my dog. I hereby waive any claims and release Old Colony Dog Training, its officers, Board of Directors, trainers, and members from any liability of any nature and for injury to myself, family guests, others, or my dog(s) while attending any dog-related activity organized and authorized by Old Colony Dog Training. I also expressly assume the risk of any injury or liability, including such injury arising as a result of the actions of any dog. I hereby agree to indemnify and hold harmless Old Colony Do Training, its officers, Board of Directors, trainers, and members from any and all claims by or on behalf of myself, my family, or guests that accompany me, arising as a result of the actions or inactions of myself or my dog(s).

Signature _____ Date _____

Print name _____