

**DEEP SOUTH ALL BREED OBEDIENCE TRAINING CLUB**  
**GREATER NEW ORLEANS, LOUISIANA**  
**Membership Form**

I do hereby understand that upon acceptance to this club, as decided by vote, my first year's dues are \$100.00 to be paid upon returning this form. Following years dues are \$35.00, and due January of the following year.

Membership consists of training me and my dog. To work together and become obedient. Membership and training privileges are limited to the persons in my household, and dogs owned by me. I understand that children must be at least 16 years of age to train with a dog. All breeds, and mixed breeds of dogs are welcomed.

I pledge to abide by the constitution and by-Laws of the club and the rules of the American Kennel Club. I understand that these training privileges are granted subject to the following conditions.

**NO REFUNDS**

- 1.) Missed classes cannot be made up.
- 2.) Submit with this application paper proof of rabies, distemper and parvo inoculations.
- 3.) **ANY DOG DEMONSTRATING AGGRESSIVE BEHAVIOR TOWARD OTHER DOGS, OR PERSONS, WHILE ON TRAINING GROUNDS MAY BE SUBJECT TO DISMISSAL OF THE TRAINING GROUNDS. (This is at the direction of the training director/ your instructor.)**
- 4.) A bitch in season will not be allowed on the grounds if she is in a beginner class and shall be reassigned a subsequent class.

Please provide the following important information:

Are you presently under suspension with the American Kennel Club: \_\_\_\_\_

Have you ever been or are you currently a member of any other dog club (if so please indicate what club(s):

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Name (First and Last): \_\_\_\_\_ Spouse \_\_\_\_\_

Names/ Ages of other household members: \_\_\_\_\_

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Trainer's Name: \_\_\_\_\_

Street Address : \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Preferred Phone Number(s): Home \_\_\_\_\_ Cell \_\_\_\_\_

Dogs Call Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ A.K.C.# \_\_\_\_\_

Preferred email address: \_\_\_\_\_

Breed: \_\_\_\_\_ (Other canines can be named on following page.)

Were you referred by another member? If so, please provide their name to us: \_\_\_\_\_

\_\_\_\_\_  
Your Acceptance Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spousal Acceptance Signature \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Paid \_\_\_\_\_ CASH/CHECK # \_\_\_\_\_ for membership of above named household.

Proof of RABIES \_\_\_\_\_ DISTEMPER \_\_\_\_\_ PARVO \_\_\_\_\_

For DSABOTC, Inc. by \_\_\_\_\_ Application proposed/Passed on \_\_\_\_\_

**DEEP SOUTH ALL BREED OBEDIENCE TRAINING CLUB**  
**GREATER NEW ORLEANS, LOUISIANA**  
**Membership Need to Acknowledge Form**

Please READ & Sign the following please, thank-you.

**WHO DID DEPOSE AND SAY: That while training my dog(s) with Deep South All Breed Obedience Training Club, Inc. (from here in to be called DSABOTC, Inc.) I hold DSABOTC, Inc. its members, officers, directors, and the owner/lessor of the training premises while training is taking place, harmless from any claim for loss or injury which may be alleged to have been caused directly, or indirectly, to any person, or thing, by the act of my dog while in or upon the training premises or grounds and I personally assume all responsibility and liability for any such claim. I further agree to hold the parties harmless from any claim for loss of my dog, disappearance, theft, death or otherwise, whether such loss disappearance, theft, damage injury or death be caused or alleged to be caused by the negligence of any other person, or any other cause or causes. I hereby assume the sole responsibility for and agree to the indemnity and save the aforementioned parties harmless from any and all loss and expense (including legal fees)by reason of liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death, at any time resulting therefrom sustained person, or persons, including myself, or an accountof, damage to property, arising out of or in consequence of my participation in training with DSABOTC, Inc.**

Your acceptance signature \_\_\_\_\_ Date\_\_\_\_\_

What other canines live in your home? Please list them below:

Call Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ A.K. C. \_\_\_\_\_

Breed: \_\_\_\_\_ Proof of RABIES \_\_\_\_\_ DISTEMPER \_\_\_\_\_ Parvo \_\_\_\_\_

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Call Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ A.K. C. \_\_\_\_\_

Breed: \_\_\_\_\_ Proof of RABIES \_\_\_\_\_ DISTEMPER \_\_\_\_\_ Parvo \_\_\_\_\_

Call Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ A.K. C. \_\_\_\_\_

Breed: \_\_\_\_\_ Proof of RABIES \_\_\_\_\_ DISTEMPER \_\_\_\_\_ Parvo \_\_\_\_\_

