



NORTHWEST OBEDIENCE CLUB INC. CLASS APPLICATION

(All Classes Are 7 Week Sessions)

NOTE!: Check the CLASS SCHEDULES and class pre-requisites before filling in this application.

[Link to Class Schedules](#)

Date of Application: _____ Name: _____ Phone Number: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____ Best time to contact you: _____

Class Session #: _____ Member Non-Member Fee Enclosed: _____ Check Cash

Class Selections: *Note – All advanced classes require the Instructor or Director of Training approval. Check class pre-requisites.

OBEDIENCE		RALLY OBEDIENCE		AGILITY		K9 NOSE WORK	
<input type="checkbox"/> Puppy (Under 6 mo.)	Day: _____ Time: _____	<input type="checkbox"/> Rally	Day: _____ Time: _____	<input type="checkbox"/> Foundation	Day: _____ Time: _____	<input type="checkbox"/> Intro to Nose Work	Day: _____ Time: _____
<input type="checkbox"/> Beginner (6 mo. & up)	Day: _____ Time: _____			<input type="checkbox"/> *Intermediate	Day: _____ Time: _____	<input type="checkbox"/> *Intro to Odor	Day: _____ Time: _____
<input type="checkbox"/> *Novice	Day: _____ Time: _____			<input type="checkbox"/> *Advanced/ Competition	Day: _____ Time: _____	<input type="checkbox"/> *Intermediate Nose Work	Day: _____ Time: _____
<input type="checkbox"/> *Pre-Open / Open	Day: _____ Time: _____					<input type="checkbox"/> *Advanced Nose Work	Day: _____ Time: _____
<input type="checkbox"/> *Pre-Utility / Utility	Day: _____ Time: _____						

INFORMATION ABOUT YOUR DOG			
Your dog's call name: _____		Breed: _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered <input type="checkbox"/> Spayed
Handlers name: _____	Dog's birthdate: _____	Age of dog when class starts: _____	How long have you had your dog? _____
Did you obtain your dog from a rescue organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, What rescue? _____ (If yes, please include supporting documentation with your application) We offer a 50% discount for a rescue dogs first class.			
Have you trained your dog at another facility? ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Which facility? _____ When? _____			
Is/Does your Dog: <input type="checkbox"/> Shy/Timid <input type="checkbox"/> Have Guarding Issues <input type="checkbox"/> Nip/Bite			

YOUR DOG'S HEALTH RECORD			
Dates Inoculated for DHLPP: 1st: _____ 2nd: _____ 3rd: _____ (Note: for dogs under 1 year of age)			
Date inoculated for Rabies: County _____ Tag/Certificate # _____ <input type="checkbox"/> 1 Year <input type="checkbox"/> 3 Year			
Name of veterinarian/animal hospital: _____			Vet's Phone Number: _____
Address: _____	City _____	State _____	Zip _____
Important!!! Please read the next page, print both pages, attach a copy of your dog's most recent vet receipt, they must be included with your payment and signature on the application.			

Office Use Only:

Amount Due: _____ Date Received: _____	Date(s) DHLPP-P Vaccines Verified: 1st: _____ 2nd: _____ 3rd: _____
<input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash	
<input type="checkbox"/> Service Credits Applied <input type="checkbox"/> Health Records Received	
<input type="checkbox"/> Rescue Credit applied	Date Health Record/Vaccines Verified: _____



NORTHWEST OBEDIENCE CLUB INC. CLASS APPLICATION TRAINING HALL RULES, POLICIES AND AGREEMENT

Date of Application: _____ Name: _____ Dogs Name: _____

TRAINING HALL RULES, POLICIES AND AGREEMENT

Application for training must be signed by the person who will handle the dog during classes or parent/guardian in the case of a minor.

- The person who is designated on the application to handle the dog must handle the dog at every class, no substitutions allowed.
- Minors must be at least fourteen (14) years old by the first day of class. Exceptions are approved by the Director of Training.
 - Full Training Fee is required in order to reserve a place in class.
 - No Training Fee will be refunded after the first night of class.
 - NOCI recommends a martingale collar for Beginners classes. Only flat collars are permitted in puppy classes.
 - Family members and friends are welcome to watch quietly.
 - It is your responsibility to keep your dog under control at all times.
 - All dogs must be restrained from barking, whining, growling, or snapping at other dogs or people.
 - If you need help or instruction in correcting these actions, please ask your instructor or Director of Training.
- Dogs which bite, attack, or appear to be threatening to other handlers or their dog will not be allowed to remain in the training hall.

STATEMENT OF HEALTH

I hereby swear, attest, and affirm that this animal is currently inoculated against Rabies, DHLPP and all other diseases as required by local ordinance, and it is free from fleas, worms, communicable parasites and diseases. If at any time I become aware that this animal has contracted any of the above, (or any condition that may pose a health risk), I will immediately inform my class instructor and/or an officer of NOCI.

I further recognize that I have an obligation to all persons who participate in any class and will refrain from bringing animal onto NOCI property that does not have all required inoculations up to date, or has any parasitic condition, until that condition is no longer a threat. By my signature on this form, I hereby authorize my veterinarian to release information on this dog regarding inoculations, diseases, and communicable parasites to an authorized NOCI representative upon request.

TRAINING AGREEMENT

I hereby apply for training privileges at Northwest Obedience Club, Inc. I agree to conduct myself in accordance with the rules governing training at this facility. I further agree to assume full responsibility for the conduct of my dog while on club property, and release Northwest Obedience Club Inc. from any and all claims, actions, or causes of action arising out of or in connection with training classes or the actions of my dog. I understand that my enrollment fee will NOT be refunded after the first night of class, and there will be NO make-up session or partial refunds should classes be cancelled due to circumstances beyond NOCI control (power outages, weather etc.). I hereby affirm that I have read and understand and hereby agree to adhere to all conditions and statements contained in this application.

SIGNATURE: _____ DATE: _____
Person handling the dog or parent/guardian of minor 14 and older

To reserve your space in a class the application and fees must be received by the reservation deadline. Print out entire form (2 pages), sign and send both pages of this form, most recent vet receipt and enclose payment.

Make check payable to NOCI.
Send to:
Northwest Obedience Club Inc.
110 W Woodstock St.
Crystal Lake, IL 60014