4-H Dog Project Enrollment Form

Member's Name:			Phone:		
Last Address:	First				
Street	City		^{Zip} Member's	Grade:	
	Name:			As of Jan. 1st	
	Last	First			
Dog's Name:		Breed	1:	Age:	
Address where dog re	sides if different than member:				
Owners Name:		Relationship to Own	er:		
2nd Dogs Name:		Breed	1:	Age:	
Number of years dog	has received training (private or	- 4-H):			
Last level (class) of tra	aining completed by dog (private	e or 4-H):			
	CHECK CLASS(ES) DESIRED	: YOU MAY CHOOSE ONI Fee: \$10 Per Member	E OR MORE CLAS	SES	
Showmanship	Pre-Novice A	Pre-Novice B	No	ovice	
Agility	Graduate Novice	Pre-Open	0	pen	
Pre-Utility	Utility	Amou	Amount Paid:		
	: A copy of the vaccination re re attending sessions with yo			ination must be turned	
Rabies	Distemper/DHLP	Kennel Cough			
(If administered separ	ately): Hepatities	Parvovirus	Leptospiro	osis	
4-H DOG	PROJECT WAIVER, ASSUMP	TION OF RISK AND AGR	EEMENT TO HOLI	DHARMLESS	
	ce in dog training classes is not witho I will be exposed to may be difficult to	, j	, ,	, , , , , , , , , , , , , , , , , , ,	
for my dog may suffer, incl	e the club, its employees, officers, me uding specifically, but without limitatio injury while attending any training se	n, or injury or damage resulting	from the action of any o	log, and I expressly assume	
harmless this club, its emp	inducement to the acceptance of my loyees, officers, members, and agent raining session or function of the club	s from any and all claims or clair	ns by any members of	my family or any person	
	ot a currently enrolled 4-H member/lea or scouts or other youth/adults partic			lies to members of other youth	
Signature of Member:					
Signature of Parent(s)/G	Guardian(s):				
YES, I UNDERSTAND T	THE DOG PROJECT AND FAIR R	ULES: MEME	BERS INITIALS:	PARENT INITIALS:	