Registration Form for Stock Dog Clinic

with Chris Jobe

May 2 & 3

(one per dog/ handler)

Registration deadline April 15

Limited to 10 dogs

Auditors Welcome

No refunds unless I can fill your spot.

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOG’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BREED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WORKING SPOT $300.00 GST included

A DEPOSIT \_\_\_$100.00 BALANCE 200.00 DUE April 15

Lunch Included

12:00AM-1:00PM: lunch Approx

\_\_\_AUDITING $100.00 for 2 days

Bring your own chair

Dry Camping is available

AMOUNT ENCLOSED $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Handlers are responsible for the action of their dogs at all times. Keep dogs on leash or kenneled at all times except in the arena or field.

Liability Waiver:

In consideration of the acceptance of this and the opportunity to train my dog(s), I agree to hold instructor Chris Jobe, Canine Solutions or Mildred Barry and all associates harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing byte act of this dog or dogs while in or upon the premises or grounds or near any entrance thereto, and I personally assume all responsibility and liability for such claim, and I further agree to hold the aforementioned parties harmless from any claim for damage or injury to the dog or myself, either physically or mentally, whether such loss, disappearance, theft, damage or injury, be caused or alleged to be caused by negligence while in or upon the premises of the Event grounds. The terms of this agreement bind the parties for the current period of training and all subsequent classes/training/events in which they hereafter participate.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail: completed registration form with check made out to Canine Solutions

E-transfers: to [chris@caninesolutions.ca](mailto:chris@caninesolutions.ca) with completed registration form

Christine Jobe

10112 Range Road 52

Cypress County AB T1B0K6