



GO DOGS! INC. APPLICATION FOR FLYBALL CLASS



Name of Class: Beginners & Advanced (combined)
Cost of Class: \$70.00 plus \$4.90 tax = \$74.90 (Go Dogs! members)
\$85.00 plus \$5.95 tax = \$90.95 (non-members)

Length of class: 6 weeks

This application must be filled out and returned to Crystal Cappel at the address below along with your check made payable to GO DOGS! INC. Due to the amount of setup and space required, class is limited and applications will be accepted on a first received basis. If class is filled, your check will be returned to you. Once classes have begun, no refund of fees shall be made unless request is made in writing to the board of directors of GO DOGS! INC. Please note that monies for class will not be deposited until class starts.

- Only one handler should train the dog throughout the class.
• Children under 14 will be allowed to train only with the approval of the training director. A parent or guardian must be present during all classes in which their child may be allowed.
• Aggressive dogs will not be accepted into our group classes, but will be referred for private instruction.
• No dog or people abuse of any kind will be tolerated. If the instructor feels someone is being abusive to anyone or any dog, the instructor has the discretion to permanently dismiss that person from the class.

Go Dogs reserves the right to refuse to allow handlers and/or their dogs into a class at its discretion.

Go Dogs does not allow refunds of any class fees unless the handler and/or dog has sustained an injury that will not allow them to participate in class. Any refund requests must be made to the Board; instructors do not have the permission or authority to grant any refund requests.

SEND APPLICATION TO: Crystal Cappel, 57848 Galveston Rd, Atlantic, IA 50022.

If you have any questions, please send e-mail to bctugntoys@yahoo.com, or call Crystal at 712-249-5291 (Cut here and return bottom portion with payment.)

Go to "Calendar" button on the Go Dogs! web site at www.GoDogsOmaha.org to check the dates of upcoming classes.

Class level for which you are applying: Beginners _____ Advanced _____
Handler's Name: _____ Phone: _____
Address: _____ Zip Code: _____
Dog's Name: _____ Dog's Date of Birth: _____
Breed of Dog: _____ Sex = M ___ Neutered? ___ F ___ Spayed? ___
E-mail Address: _____

I understand that attendance in dog training classes is not without risk to myself or my dog. I hereby waive all claims and indemnify, release and hold harmless Go Dogs II, Inc., its instructors, agents, employees, successors and assignees, along with the owner of the property where this class is held, from and against any and all injuries or damages, causes of action, claims, suites and judgments or liability of any kind sustained, brought, or asserted by myself, my dog, any member of my family or any other person accompanying me to the classes or to any training session or function associated with or held in conjunction with this class or for any other function or training session held by Go Dogs II, Inc.

I further hereby release, indemnify, and hold harmless Go Dogs II, Inc., its instructors, agents, employees, successors and assigns along with the owner of the property where the class is held, from and against any and all damages, injuries, causes of action, claims, suits, judgments, or liability of any kind for injuries or damages, whether personal injuries or property or otherwise, caused by myself, my dog, or any member of my family or any other person accompanying me to the class or to any training session or function held by Go Dogs II, Inc., whether arising from or resulting from, whether directly or indirectly, the actions of myself, my dog, any member of my family or any other person accompanying me to the class. I ALSO STATE THAT MY DOG HAS BEEN INOCULATED FOR RABIES AND PARVO.

Owner's signature: _____ Date: _____

***Please be sure to enclose payment with this bottom portion

GO DOGS MEMBERSHIP _____ IND \$40 _____ Family \$60 _____ Check Number