

**DTCSP NEW MEMBERSHIP APPLICATION 2022**

*This space reserved for the membership committee*

Application received \_\_\_\_\_

Paid \$ \_\_\_\_\_ CK# \_\_\_\_\_ Cash Date \_\_\_\_\_

First Meeting \_\_\_\_\_

Second Meeting \_\_\_\_\_

Activity Credit \_\_\_\_\_

Board Presented \_\_\_\_\_ Voted In \_\_\_\_\_

Membership Type: \_\_\_\_ Primary/Single \_\_\_\_ 2<sup>nd</sup> in household

Name: \_\_\_\_\_

Primary/Secondary Name of other applicant: \_\_\_\_\_

Children & Ages: \_\_\_\_\_

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

City: \_\_\_\_\_ State & Zip: \_\_\_\_\_

E-mails(s): \_\_\_\_\_

Phone (H): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Pawscripts Newsletter Delivery \_\_\_\_\_ US Mail \_\_\_\_\_ e-mail \_\_\_\_\_

Permission to release name in Pawscripts \_\_\_\_\_ Yes \_\_\_\_\_ No If not checked then ok to release

Permission to release email address in Pawscripts \_\_\_\_\_ Yes \_\_\_\_\_ No If not checked then ok to release

Canine Breed	Call Name	Sex	Birth date	Title(s)	Registered Name
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List all dog clubs that you are/were a member of and if you are still a member. If not still a member please tell us why.

\_\_\_\_\_  
\_\_\_\_\_

Please state why you want to become a member of the Dog Training Club of St. Petersburg:

\_\_\_\_\_  
\_\_\_\_\_

# DOG TRAINING CLUB OF ST PETERSBURG ACTIVITY LIST

This is a working club and we would like everyone to participate. What activities would you be willing to help with? Circle all that you are interested in:

Instructor	Social		
Working Obedience, Rally, Flyball or Agility Trials & Matches			
Assistant Instructor	Promotion	Secretary	Ring Help
Office/Registrar	Public Education	Chairperson	Premium List
Computer	Officer	Ring Steward	Food
Website	Newsletter	Judges	Hospitality
Building	Equipment	Other _____	

The application fee (\$40.00 Individual / \$10.00 2<sup>nd</sup> family member) must accompany the application and is non-refundable. Applicant must attend two meetings or participate in approved club functions within a six-month period before the applicant will be presented to membership for a vote.

I (we) do hereby agree to abide by the constitution and by-laws of the Dog Training Club of St. Petersburg, Inc., and the rules and regulations of the American Kennel Club. Inc. I am currently a member in good standing with any and all other AKC affiliated clubs that I participate in.

### WAIVER, ASSUMPTION OF RISK & AGREEMENT TO HOLD HARMLESS

I hereby waive and release the Dog Training Club of St. Petersburg, Inc., its members and officers from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but not without limitation, any injury or damage resulting from the action of any dog, and I expressly assume the risk of any such damage or injury while attending any class or other function of the club or while on the training grounds or surrounding area thereto.

In consideration of and as inducement to the acceptance of my application for membership, I hereby agree to indemnify and hold harmless the Dog Training Club of St. Petersburg, Inc., its members and officers from any and all claims, or claims by any member of my family or any other person accompanying me to any class or function of the club or while on the grounds or the surrounding area thereto as a result of any action by any dog, including my own.

I understand that attendance of a dog training class is not without risk to myself, members of my family or guests who may attend, or to my dog, because some of the dogs to which I(we) will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care.

I also certify that any dog(s) that I bring into the DTCSP's training facility will have been vaccinated against distemper, bordetella, hepatitis, parainfluenza, rabies and parvovirus. If under six months of age, the dog has had two sets of puppy vaccines against distemper, bordetella, hepatitis, parainfluenza and parvovirus.

Applicant:  
\_\_\_\_\_

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

Club Member Endorsement:  
\_\_\_\_\_ & \_\_\_\_\_

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