

**CLASS REGISTRATION FORM**

**Return to:  
Red River North Dog Obedience Club, Inc.  
Attention: Training Director  
2202-A Third Avenue North  
P.O. Box 863  
Fargo, ND 58107-0863**

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

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

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

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Breed of Dog: \_\_\_\_\_ Name of Dog: \_\_\_\_\_

Age of Dog: \_\_\_\_\_ Sex: \_\_\_\_\_ Age of Handler if under 18: \_\_\_\_\_

Class Name and Day: \_\_\_\_\_

Class Fee: \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_

**Because our class sizes are limited, please check with the Training Director about the availability of space in the class of your choice. (701) 280-0436**

Make checks payable to: **Red River North Dog Obedience Club, Inc.**

**Liability Waiver**

In consideration of your acceptance of entry into your training program, I do hereby, for myself, my heirs, executors, administrators and assignees; waive and release any and all rights and claims for damages which I may have against the Red River North Dog Obedience Club, Inc., its Board of Directors, Training Director, and Training Staff, as well as any others connected with this class or event, their heirs, executors, administrators, successors, and assignees for any and all injuries which I and/or any member of my family and/or friends, or my dog may suffer or cause while taking part in this class or event as a result thereof.

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

Where did you learn about RRNDOC?

Please circle one

Breeder    Veterinarian    Friend    Newspaper    Phone Book    Other \_\_\_\_\_