

Owner/Handler _____

Phone Numbers

Home _____ Work _____

E-Mail Address _____

Dog Information

Registered Name _____

Call Name _____ Birth Date _____ Sex ____

Breed _____ Tattoo # _____

Registration # _____ Registry _____

Registration # _____ Registry _____

Scorebook # _____ Titles _____

Sire _____ Titles _____

Dam _____ Titles _____

Owner _____ Breeder _____

Veterinarian Information

Name _____

Address _____

City _____ State ____ Zip _____

Phone number _____

Date of Last Checkup _____

OFA Certification _____

Due Dates

Rabies _____ DHLPPC _____ Parvo _____

Corona _____ Bordatella _____

PLEASE READ CAREFULLY: In consideration of the acceptance of this application, I hereby agree to waive any and all claims against the St. Louis Schutzhund Association, Inc., it's officers, trainers, members, members' dogs and property owners for possible loss or damage which may occur to any person, animal or thing as a result of being a spectator or taking part in association activities. Furthermore, it is understood by every member/handler that every dog will be at all times in the care and control of that dog's owner/handler, and that owner/handler who is the undersigned agrees to be fully responsible for the actions of his/her dogs. And I realize that by signing, I might be relinquishing or waiving certain legal rights I otherwise would have had.

Signed _____ Date _____

St. Louis Schutzhund Association
Dog of Record

Revised Aug 2003