



NEW MEMBER APPLICATION
CATAWBA VALLEY OBEDIENCE CLUB, INC. (CVOC)

P O BOX 3581
Hickory, NC
28603

PLEASE TYPE OF PRINT CLEARLY
ALL FIELDS MUST BE COMPLETED

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

ADDRESS/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

The club directory, which is private, for members only, will include your phone number and email address unless designated otherwise: \_\_\_\_\_ email only (i.e. phone number will not be published). A Membership Packet will be provided upon approval of membership.

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MEMBERSHIP TYPE: INDIVIDUAL - \$35: \_\_\_\_\_ FAMILY \*see schedule: \_\_\_\_\_ JUNIOR (under 18): \_\_\_\_\_ Senior (62+): \_\_\_\_\_

For Family membership, please provide the following information:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Junior/Senior \_\_\_\_\_

DOG INFORMATION: (Use back of form if necessary) TOTAL # OF DOGS: \_\_\_\_\_

BREED(S): \_\_\_\_\_ AGE: \_\_\_\_\_ MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_ SPAY/NEUTERED: \_\_\_\_\_

TRAINING HISTORY AND PREVIOUS OBEDIENCE EXPERIENCE (Include titles held): \_\_\_\_\_

\_\_\_\_\_

PREVIOUS OR CURRENT DOG CLUB MEMBERSHIP AND OFFICES HELD: \_\_\_\_\_

\_\_\_\_\_

TRAINING INTERESTS AND GOALS: \_\_\_\_\_

(What would you like to learn, participate in, etc.? What are your goals for the next year?)

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\*FEES: I understand that there are four (4) types of CVOC memberships: INDIVIDUAL (Dues \$35.00/yr.); FAMILY (Dues \$35.00 for first member and \$17.50 for each additional member per year); JUNIOR (Dues \$17.50/yr.); SENIOR (Dues \$17.50 for first member and \$17.50 for each additional Senior per year); and that members under age 18 are non-voting.

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With my signature, I certify that I have a serious interest in dog obedience training, subscribe to the purpose of CVOC, and at least one of my dogs can substantially perform the exercises prescribed in the AKC Pre-Novice Obedience Class.

AGREEMENT TO HOLD HARMLESS, WAIVER AND ASSUMPTION OF RISK

I UNDERSTAND THAT PARTICIPATION AS A CVOC MEMBER IS NOT WITHOUT RISK TO MYSELF, FAMILY MEMBERS, OR MY DOG; BECAUSE SOME OF THE DOGS TO WHICH I 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 HEREBY WAIVE AND RELEASE THE CATAWBA VALLEY OBEDIENCE CLUB, INC., HEREINAFTER REFERRED TO AS CVOC, ITS OFFICERS, MEMBERS AND AGENTS FROM ANY AND ALL LIABILITY AND CLAIM OF ANY NATURE, FOR INJURY OR DAMAGE WHICH I OR MY DOG MAY SUFFER, INCLUDING SPECIFICALLY, BUT WITHOUT LIMITATION, ANY INJURY OR DAMAGE RESULTING FROM THE ACTION OF ANY DOG, INCLUDING MY OWN, AND I EXPRESSLY ASSUME THE RISK OF SUCH DAMAGE OR INJURY WHILE ATTENDING ANY FUNCTION OF THE CVOC, OR WHILE ON THE TRAINING GROUNDS OR THE SURROUNDING AREA. I CERTIFY THAT THE DOGS I BRING TO EVENTS AND TRAINING CLASSES HELD BY CVOC HAVE BEEN VACCINATED IN ACCORDANCE WITH THE LAWS OF THE STATE OF NORTH CAROLINA AND IN ACCORDANCE WITH ANY AND ALL LOCAL LAWS AND REGULATIONS.

FURTHER, I HEREBY GRANT PERMISSION TO CVOC FREE USE OF ANY PHOTOGRAPH TAKEN BY CLUB MEMBERS DURING CLUB ACTIVITIES AND/OR THOSE SUBMITTED TO CVOC BY MYSELF. THE PHOTOGRAPHS MAY OR MAY NOT BE POSTED ON THE INTERNET, BULLETIN BOARDS, OR USED IN WHATEVER MANNER CVOC DEEMS NECESSARY. PHOTOS SUBMITTED TO CVOC WILL NOT BE RETURNED. I HAVE READ THE ABOVE AGREEMENT AND UNDERSTAND THESE CONDITIONS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

RESPONSIBLE PARENT/GUARDIAN IF PERSON APPLYING FOR MEMBERSHIP IS LESS THAN 18:

To be completed by CVOC: Level of Training: \_\_\_\_\_ CVOC Beg. Obedience Class \_\_\_\_\_ CVOC Evaluation: \_\_\_\_\_