



LEEWARD TRAINING CLUB OF HAWAII, INC.

Location: _____

Class: _____

OWNER OF
DOG

_____ Last Name

_____ First Name

HOME
ADDRESS

CITY

ZIP

EMAIL

HOME PHONE

CELL PHONE

HANDLER

AGE OF HANDLER

NAME OF EMERGENCY CONTACT
(FOR HANDLER)

PHONE NO.

DOG'S NAME

DOG'S DATE
OF BIRTH

BREED

SEX
(M/F)

I agree to uphold the Constitution and By-laws of the Leeward Training Club of Hawaii, Inc. (LTCH) and to abide by the rules and regulations of the American Kennel Club to the best of my ability. I hereby certify my dog's annual inoculations or titers are up to date. I further certify I will keep them up to date for the duration of my LTCH Associate or Regular Membership. I further agree to release and hold the LTCH, its officers, directors, instructors, agents, employees, and/or representatives harmless from any injury, expense, costs, or damages to myself, my dog, or any handler sponsored by me. In addition, I agree that I will defend and indemnify the LTCH for any injury, expense, costs, or other damages to any dog handlers, whether sponsored by me or not, or third parties arising out of my own actions or the actions of my dog. I have read and understood the above stated provisions and agree to accept those responsibilities.

During the course of training, graduation, trials, and special events, the LTCH or its representative(s) may take photographs, videos, and/or audio recordings of the events and/or their participants both human and animal. These photographs, videos, and/or audio recordings (further known as media) are used by LTCH in promotion of the Club and furtherance of LTCH's educational purposes. I, the undersigned party, authorize LTCH, its representatives, instructors, volunteers, and/or employees to take and use the media of myself, minors, dependents, and/or animals under my control for any lawful purpose. I waive any right to review or approve the media, the use of the media, and/or any subject in which the media is used in conjunction with LTCH's normal course of business including but not limited to advertising, trade, promotion, exhibition, publicity, or web content. I waive any right to royalties or other compensation arising from or related to the use of the media. I release and discharge and agree to hold harmless LTCH and their representatives from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking, processing, or publication of the media.

OWNER'S
SIGNATURE

DATE

*** NO REFUND ***

(This portion to be completed by LTCH Registration Staff.) PLEASE BRING TWO (2) COPIES OF THIS FORM. MUST BE PROCESSED BY LTCH REGISTRATION STAFF TO BE VALID.

ASSOCIATE

REGULAR
MEMBER

REC'D
BY

DATE
ACCEPTED

RESCUE:

PAID CASH

PAID BY CK

\$ _____

SHOTS:

YES

NO

\$ _____

CHECK NO. _____

YES

NO