

THE JOLLY DOG SCHOOL

2024

Please wear your name tag when attending classes

MEMBER INFORMATION						TICK	PAID EFT or CASH OFFICE ONLY
SURNAME					MEMBERSHIP TYPE	RETURNING	
					VIEW FEES ON WEBSITE	SINGLE	
						PENSIONER	
						FAMILY	
FIRST NAME MEMBER 1					FIRST NAME MEMBER 2		
ADDRESS							
HOME PHONE NO				CELL PHONE NO			
EMAIL ADDRESS: (PLEASE PRINT IN CAPITALS)							
IDENTITY NO							
DOG'S NAME		BREED OF DOG		AGE OF DOG			
DOG'S NAME		BREED OF DOG		AGE OF DOG			
IS THIS A RESCUE DOG		Yes / No		ARE YOU INTERESTED IN DOING AGILITY		Yes / No	
RESCUED YEAR							
ARE YOU INTERESTED IN DOING COMPETITIVE OBEDIENCE		Yes / No		ARE YOU INTERESTED IN DOING COMPETITIVE AGILITY		Yes / No	
WHERE DID YOU HEAR ABOUT JDS		THE VET	WORD OF MOUTH	TRAINED PREVIOUSLY AT JDS	A FRIEND	ADVERT	
WHAT LEVEL OF TRAINING ARE YOU REQUIRING		BASIC/DOMESTIC	SOCIALIZATION	INTERMEDIATE	TRICKS & FUN	SHOW LEVEL	
IN CASE OF EMERGENCY							
NAME OF LOCAL FRIEND OR RELATIVE:		RELATIONSHIP:		HOME PHONE NO.:	CELL NO.:		
BANKING DETAILS							
Bank Branch		Nedbank Cresta					
Account name		The Jolly Dog School					
Account Number		1913204642					
With the signing of this membership form I waive any claim, or claim on my behalf, against The Jolly Dog School for loss, damage or injury sustained for any reason whatsoever.							
SIGNATURE						DATE	