



# GOLETA VALLEY DOG CLUB



## 2011-12 Member Application & Information

(Please print legibly)

NEW MEMBER     RENEWING MEMBER     MY INFORMATION HAS CHANGED    # OF DOGS: \_\_\_\_\_

NAME: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE (CIRCLE PRIMARY PHONE TYPE FOR ROSTER):  
HOME: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
IN CASE OF EMERGENCY: CONTACT NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_ RELATIONSHIP TO YOU: \_\_\_\_\_  
HOW DID YOU LEARN ABOUT GVDC? \_\_\_\_\_

*DOG MEMBER(S) INFORMATION:*

DOG 1 NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  MALE  FEMALE  
BREED: \_\_\_\_\_ DATE OF LAST VACCINATIONS: \_\_\_\_\_  
LIST TRAINING CLASSES TAKEN: \_\_\_\_\_  
TITLES EARNED, IF ANY: \_\_\_\_\_  
DOG 2 NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  MALE  FEMALE  
BREED: \_\_\_\_\_ DATE OF LAST VACCINATIONS: \_\_\_\_\_  
LIST TRAINING CLASSES TAKEN: \_\_\_\_\_  
TITLES EARNED, IF ANY: \_\_\_\_\_  
(LIST ADDITIONAL DOG MEMBERS AND THEIR INFORMATION ON THE BACK)

YOUR VETERINARIAN HOSPITAL: \_\_\_\_\_  
CITY: \_\_\_\_\_ PHONE: \_\_\_\_\_

GVDC MEMBER ROSTER IS SHARED WITH OTHER CLUB MEMBERS. IF YOU DO NOT WANT YOUR NAME AND INFORMATION PUBLISHED ON THE CLUB ROSTER, PLEASE CHECK HERE .

By signing below you agree to the following: "I understand that dog sports such as agility are potentially hazardous to me or my dog(s). I hereby assume sole responsibility for and agree to indemnify and hold Goleta Valley Dog Club and its agents and assignees harmless from any and all loss and expenses (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death, at any time resulting therefrom, sustained by any animal, person or persons, including myself, or on account of damage to property may be caused, and whether or not the same may have been caused or alleged to have been caused by negligence of the aforementioned parties or any other reason. I agree that this release is intended to be as broad and inclusive as permitted by the laws of the state of California; and that, if any portion of it is held invalid, the balance shall continue in full legal force and effect."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian signature, if member is under 18: \_\_\_\_\_  
Parent/Guardian printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Annual dues of **\$50**, payable to GVDC, include any number of dogs in your family. Membership is renewable in October. Paid amount: \$\_\_\_\_\_. Please circle one: Cash OR Check # \_\_\_\_\_

Please mail completed application and \$50 payment to: GVDC Membership, 5153 San Simeon Drive,  
Santa Barbara, CA 93111. For membership questions, email [kellystark@cox.net](mailto:kellystark@cox.net).

**THANK YOU & WELCOME TO GVDC!**