Marion-Alachua Dog Training Association - Renewal Application

(form MUST be submitted with membership fee)

Membership Category: Date:_____

___Single $20.00
___ Household $30.00
___Junior $10.00 (18 yrs or younger, not a family member)
___ Associate $10.00 (current member changing to inactive status, no benefits)
___ Additional US Postage: $5.00 (if no email for MADTails)

Name:_____
Address:_____
City/State/Zip _____
Phone (_____)_____ **E-mail:** _____

Please make checks payable to MADTA / mail to Mary Anne Fitch, Member Chair 3591 NE 22nd Ave, Ocala Fl. 34479

Statement of Participation

Without the help of volunteers, no club can be successful. How can your membership best benefit MADTA?

You are expected to attend meetings and are required to volunteer for 2 activities per year. It takes *many* hands to put on events; your cooperation in helping is of the utmost importance.
I am interested in working/helping on the following activities: (check all interested in)

Classes:	**Shows (OB/Rally, Agility:)**	**Equipment:**	**General/Misc:**
__Teach classes (circle venues) Obedience Rally Agility Conformation Other:	__Setup/Take down at trials	__Build	__Computer work
__Assist with training	__Stewarding (training to be provided)	__Repair	__Publicity
__Assist with class registration	__Committee work	__Other:	__Seminars
__Assist with CGC tests	__Trophies		__Hold Office
__Assist at Show & Go	__Ribbons		__Building setup/ breakdown for special events
__Other:	__Hospitality		__Help with raffle baskets, selling tickets
	__Other:		__Other:

Breed(s) of Dog(s) _____

Liability Release

I have enrolled my dog and myself in a training class and /or other dog related activity sponsored by the Marion-Alachua Dog Training Association, Inc., a Florida not-for-profit corporation. I, and any guest I bring, assume the risk of any injury resulting to my dog or to myself in connection with this activity insofar as concerns my liability and that of the Marion-Alachua Dog Training Association, Inc., any of its members, Officers and the owner(s) of any facilities used by the Club. I also hereby indemnify and agree to hold harmless the Marion-Alachua Dog Training Association, Inc., any of its members, Officers and the owner(s) of any facilities used by the club against any and all claims for liability for damage to the persons or property of others caused by my dog or myself while on the training area used by said Club or any property adjacent thereto.

_____ _____ _____
Printed name Signature Date

If under age 18, Parent or Guardian:

_____ _____ _____
Printed name Signature Date

If this is a Household Membership, please list names and relationship, living in household:

Name _____ Relationship _____
Name _____ Relationship _____
Name _____ Relationship _____
Name _____ Relationship _____