CACM REGISTRATION 2023

Summer Classes – Start Dates Vary

Current students please fill out this form and mail with payment

Classes are 8 weeks in length and held at 6305 Glenn Carlson Drive, St. Cloud, MN 56301 *CLASS SIZES ARE LIMITED! PRE-REGISTRATION IS REQUIRED*

**Please bring your own lawn chair due to limited seating.

Forms MUST be mailed in prior to the start of the first class. You will only be contacted if there is a problem with your registration.

Return completed form with check payable to CACM to:

Lynn Arlt, 1021 28th Ave North, St. Cloud, MN 56303

If you have any questions, call 320-828-3149 or email: arltlynn@gmail.com

Owner's Name:				_
Address:			Zip:	_
Day Phone:	Cell Ph	none:		_
Eve Phone:	E-mail:			
Dog's Name:				_
Last Class Taken/Where:				<u>-</u>
List Titles/#Q's Towards Title:				-
If new to CACM, how did you hear of us (Chec				
Newspaper Poster or Flyer _		Referral/Who		
Are you currently a member of CACM? YES	NO			
*NOTE: If you are interested in beco	ming a member o	f CACM (or wish to	renew your membership), please	e go to the web
site for information at www.cacmagi				
If you are enclosing a membership a	pp. & dues, pleas	e pay with a separ	ate check. Membership must be	approved by the
Board before a member discount ca	n be applied towa	ard classes. Thank y	you!	
CLASS	DAY	TIME	INSTRUCTOR	
Beginning Agility - FULL	Monday	6:00 – 7:00	Betty Johnson	
Advanced Agility - FULL	Tuesday	6:00 - 7:00	Karl Johnson	
Agility Foundations - FULL	Wednesday	5:30 - 6:30	Mary Frank	
Agility Course Options - FULL	Wednesday	6:45 - 7:45	Mary Frank	
Intermediate Agility - FULL	Thursday	6:15 - 7:15	Dorein Johnson	
\$70 Members / \$80 Non-Members PER 8 WEEK CLASS				
-\$10 discount may be applied for handlers under the age of 18 years.				
= TOTAL FEES ENCLOSED (Entry fee vouchers can be used to pay up to 50% of a class)				
Please see class descriptions for class entry requirements to ensure your team is properly enrolled				
GENERAL AGREEMENT: I (we) agree to hold Canine Agility of Central Minnesota, Inc./CACM, including its members, officers and directors, owners of the premises upon				
which classes are held, harmless from any claim for the loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act				
of this dog while in or around the premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim: and				
I (we) further agree to hold the aforementioned parties harmless from any claim for loss of this dog by disappearance, theft, death or otherwise, and from any claim				
for damage or injury to the dog, whether such loss, disappearance, theft, damage or injury, be caused, or be alleged to be caused, by the negligence of the parties aforementioned, or by the negligence of any other person, and any other cause or causes. I (we) hereby assume the sole responsibility for and agree to indemnify and				
save the aforementioned parties harmless from any and all loss and expense (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 there from, sustained by any person or persons, including myself				
(ourselves) or on account of damage to property, arising out of or in consequence of my (our) participation in this event, howsoever such injuries, death or damage to				
property may be caused, and whether or not the same may have been caused or may have alleged to been caused by negligence of the aforementioned parties or any				
of their employees or agents, or any other persons. No pregnant bitches are allowed in class. A bitch will not be re-admitted to class for 6 weeks post whelping, verification of pregnancy may be requested and veterinary documentation provided upon request. Appeals may be submitted in writing to the Director of Training,				
Lynn Arlt, for CACM Board consideration.	ny documentation pro	ovided upon request. A	ppears may be submitted in writing to the	e Director or Training,
• • • • • • • • • • • • • • • • • • • •				
Signature (parent/guardian if under 18 years of	of age)		Date	
*MY SIGNATURE ABOVE ALSO STATES THAT	• ,	D AGREE TO ARIDE	BY THE "CACM RULES" (TO FNS	URE SAFETY AND

ENJOYMENT BY ALL).