



**GATEWAY TRACKING CLUB**

**ST LOUIS, MO**

**TRACKING CLASS APPLICATION**

\_\_\_\_\_ Basic Class .....\$100.00.....8 weeks duration  
 \_\_\_\_\_ Intermediate .....\$ 60.00.....4 weeks duration  
 \_\_\_\_\_ Variable Surface Tracking .....\$125.00.....6 weeks duration

Please select class you are interested in attending

Equipment: Leather/nylon collar & 6' Leather lead - 1st session for basic. Advanced classes need harness.

Fee must accompany this application, with checks made payable to GATEWAY TRACKING CLUB. No refunds after first class session. Retain the above portion of this form for yourself. Return bottom portion. If you are accepted into the class, you will be notified with exact date and time of first class.

**APPLICANT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail \_\_\_\_\_

Telephone :Home (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell(\_\_\_\_) \_\_\_\_\_

Breed: \_\_\_\_\_ AGE: \_\_\_\_\_ Call Name: \_\_\_\_\_

Rabies Tag # \_\_\_\_\_ Date: \_\_\_\_\_ DHLP-P Date \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Phone \_\_\_\_\_

It will be necessary to do a considerable amount of walking during this class in ALL types of weather and over varying terrain. As the handler, are you physically able and willing to do this? \_\_\_\_ Yes \_\_\_\_ NO.

In consideration of the acceptance of this application, I agree to hold GATEWAY TRACKING CLUB harmless for any loss or injury, from whatever cause, which may occur upon or within the vicinity of the training premises, to (1) said dog, myself, or any person handling or training said dog on my behalf, or (2) to any person, animal, or thing which may be alleged to have been caused by said dog, myself, or any person handling or training said dog on my behalf.

Date: \_\_\_\_\_ Signature, \_\_\_\_\_

For more information - to enroll in a class return this application to:  
 GATEWAY TRACKING CLUB, Sandi Thompson, Secretary, 1561 Berry Ct. Arnold, MO 63010 314-640-9889