



264 Fisher Street  
Franklin, MA 02038  
508-553-9300  
www.masterpeacedog.com

## Application for Membership

Please check one: \_\_\_\_\_ New Member      \_\_\_\_\_ Membership Renewal

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

Dog(s) Name: \_\_\_\_\_ And Breed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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

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

**Interests:** *(circle all that apply):*

Obedience    Agility    Rally    Freestyle    Canine Good Citizen

Therapy Dogs    Breed Handling    Playgroups    Nosework

Other (specify): \_\_\_\_\_

I certify that my dog(s) are up to date on all vaccinations as recommended by my veterinarian. I understand that my participation in all activities at MPD is at my own risk, and I will not hold MasterPeace Dog Training, any designated instructor, or any representative thereof, responsible for injury to family members, my dog, or myself.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature