



Dalmatian Club of America, Inc.

Junior Showmanship Member Application

Name _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

Do not publish my address phone number e-mail address

AKC Junior Handler Number _____ Birthdate _____

AKC Registration Name and Number of one Dalmatian owned or co-owned by the applicant –

I, the undersigned, hereby apply for junior membership in the Dalmatian Club of America, Inc. I certify that I am over the age of nine years and under the age of eighteen years, and agree to abide by the rules of the Junior Showmanship Committee, the Constitution and By-Laws of the Dalmatian Club of America, Inc., and the Dalmatian Club of America's Ethical Guidelines.

Applicant Signature _____ Date _____

Parent / Guardian Signature _____ Date _____

Your sponsor must be a member in good standing with the Dalmatian Club of America, and current on their dues.

Sponsored by _____

Please submit this application, the release forms, and your annual dues of \$10, to the Membership Chair, Kristine Benoit, 15505 Route 176, Union, IL 60180.

Please make your \$10 Dues check payable to DCA

Video / Audio / Photo Consent Release

Parent/Guardian Must read and sign below

I, the undersigned, do hereby consent to the use by DCA of the image and/or voice, of the minor child under the age of 18 described below. Regardless of whether these materials are used for fundraising, advertising, publicity, or any other purpose on behalf of DCA.

In addition, I waive all claims to compensation or damages based on the use of such minor's image or voice, or both, by DCA. I also waive any right to inspect or approve the finished photograph, video, or audio recording. I understand that this consent is perpetual, that I may only revoke in writing, and that it is binding on the minor, their heirs and assigns.

I warrant that I am the parent or legal guardian of the minor described below and have the full right and authority to grant this consent, on behalf of such minor. I warrant that I am at least 18 years of age and that I am competent in my own name insofar as this consent is concerned. I further attest that I have read this consent form and fully understand its contents.

Print _____ Date _____

Signature of Parent/Guardian _____

General Liability Wavier and Release Form (Minor Child)

This is a release of Legal Rights. Please read and understand before signing.

I hereby certify that I am the adult parent or guardian of _____ a minor child under the age of eighteen years, and I consent to his/her participation in DCA events and supported events.

I understand and acknowledge that I am fully aware of and assume the risks (including but not limited to the risk of serious bodily injury, property loss or damage) of said minor child's participation in DCA events and recognize my responsibility to ensure that said minor child participates only in those activities for which he/she has the required skills, qualifications, training and physical conditioning. I understand that DCA shall have no responsibility to pay for medical treatment and related costs if said minor child is injured.

Fully allowed by law, I hold harmless and agree to indemnify DCA, its officers, directors, volunteers, and agents, from and against any present or future claim, cause of action, loss or liability for injury to person or property, which said minor child may suffer or for which said minor child may be liable to any other person, related to said minor child's participation in DCA resulting from any cause whatsoever.

I am at least eighteen years of age and have carefully read and freely signed this Liability Waiver and Release Form for the minor. I understand and agree that no oral or written representations can or will alter the contents of this document.

Signature of Parent/Guardian _____