



## CGC EVALUATION APPLICATION

**TIME: 5:30 P.M.**

**PLACE: DuPage County Fair Grounds, Building 4**

**COST: \$15.00 - Make check payable to GABOC**

**PLEASE NOTE: Bring your dog's brush or comb**

Date of evaluation \_\_\_\_\_ **Application must be received prior to evaluation date.**

Owner Name \_\_\_\_\_

Handler Name \_\_\_\_\_

Address \_\_\_\_\_

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

E Mail \_\_\_\_\_ Phone \_\_\_\_\_

Dog's name \_\_\_\_\_ Breed \_\_\_\_\_

Dog's date of birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

How did you hear about our club? \_\_\_\_\_

In consideration for being accepted for evaluation at GABOC, I agree to indemnify and hold harmless the Glenbard All Breed Obedience Club, Inc., officers, directors, instructors, and members, against all claims or actions that may at any time be made or instituted against them or any of them by any person for the purpose of enforcing any cause of action growing out of or connected with my attendance or my dog's attendance at the evaluation conducted by GABOC. I agree to grant to this club permission to photograph and/or video, pictures of my participation. I further agree that any of the recordings may be used in club publications, or on social media to promote GABOC, and further that such use shall be without payment of fees, royalties, special credit or other compensation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please make checks payable to GABOC and mail completed application with check to:**

Chuck Holtzen  
5226 Carpenter St.  
Downers Grove, IL 60515 (630) 886-5858