

Application for Training

Day of Class: Monday

Thursday

Class: Puppy Kindergarten

Obed for Agility

Basic

Rally

Handler Information

Name: _____

Street: _____

City: _____ Zip: _____

Home phone: _____ Work Phone: _____

Age (if under 18): _____

Adult who will accompany you (if under 16): _____

If you, the handler, have any physical problems (poor hearing, arthritis, Disease, etc) that your instructor should be aware of, please explain:

How did you learn about our class?

Veterinarian

Groomer

Former Student

Parks & Rec Brochure

Other

Dog Information

Call name: _____ Male/Female Neutered/Spayed

Breed: _____ Age: _____ AKC registered? _____

Veterinarian: _____

How long have you had this dog? _____

Have you ever owned a dog before? _____ If yes, what breed(s)?

Has this dog ever bitten a person or another dog? _____ If yes, please explain:

Briefly state what you hope to accomplish in this training course: _____

As a condition to acceptance of this application, the agreement on the reverse side must be signed.

For Office Use Only

Date _____ Class _____ Paid _____

Vaccinations: Rabies _____

DHI P-P-C _____

Agreement to hold harmless, waiver, and assumption of risk

I understand that attending a dog training class is not without risk to myself or my family or guests who may attend, or my dog, because some dogs to which I may be exposed may be difficult to control and may cause injury even when handled with the greatest amount of care.

I hereby waive and release All Star Dog Training, Evelyn Greenberg, and Nita Gandara, hereinafter referred to as the "Training Organization", their employees, and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but not without limitation, any injury or damage resulting from any dog. I expressly assume the risk of such damage or injury while attending training sessions, or any other function of the Training Organization, or while on the grounds or the surrounding area thereto.

In consideration of and as inducement to the acceptance of my application for training membership by this Training Organization, I hereby agree to indemnify and hold harmless the Training Organization, its employees, and agents from any and all claims by any member of any family or any other persons accompanying me to any training session or function of the Training Organization, or while on the grounds or surrounding area hereto as a result of any action by any dog, including my own.

Signature of Owner or Authorized Agent _____

Name of Owner (if different from name on reverse side) _____

Address _____

City _____ State _____ Zip _____