

TRAINING REGISTRATION FORM
(Read, Initial, and Sign Release Agreement Below)

OWNER/HANDLER NAME

DOG'S NAME

ADDRESS

DOG'S BREED

CITY STATE ZIP

DOG'S AGE MALE/FEMALE NEUTERED

HOME PHONE WORK PHONE

VET'S NAME

E-MAIL (FOR TRAINING HANDOUTS ONLY - you will not get spammed)

CLASS NAME

START DATE

DAY OF WEEK

CLASS TIME

RELEASE AGREEMENT
(Please initial on the line provided after each statement)

→ **I understand** that bringing my pet into contact with other dogs and people poses certain risks, including the risk of contracting disease or injury. On behalf of myself, any member of my household, and/or my dog, I assume all risks associated with participating in any activities with Dog Zone. _____

→ **I agree** that Dog Zone, its respective employees and agents are not responsible for any damages that might arise from participating in activities with Dog Zone, either onsite or offsite, including, but not limited to, damages arising from personal injury to myself or my dog, medical bills, veterinary bills, loss of personal property, emotional distress, or any other damages that I, my dog, member of my household or guest that I invite may suffer. _____

→ **I understand** that in admitting my dog to Dog Zone, I am stating that my dog is in good health and has not harmed or shown aggressive or threatening behavior towards any person or any other dog. _____

→ **I understand** I am responsible for any harm caused by my dog while attending activities at Dog Zone. _____

→ **I shall** indemnify Dog Zone against any claims made against the corporation or losses or damages of any kind suffered by Dog Zone as a result of my failure to inform Dog Zone of any pre-existing conditions that my dog may have (such as illness or aggression problems). I will take complete responsibility for my dog's actions. _____

→ **I agree** to allow Dog Zone staff and trainers to take photographs and videos of me, my dog(s), and anyone accompanying me during classes and to use the images for all purposes, including promotional materials and on the Dog Zone Facebook pages and Dog Zone website without compensation or further notice. _____

→ **I understand** all classes be paid in full at time of registration and there are NO REFUNDS or EXCHANGES. _____

If you agree to the above, please sign your name in the space provided below.

Signature of Participant (or guardian)

Date

(If Participant is under 18, a parent / guardian must sign their consent. Children under 12 will not be allowed to handle dog in class. Children 12 and older may be allowed to handle dog in class at the discretion of the trainer.)