

The Canine Connection Dog Training, LLC
Registration Form

Type of Class _____ Beginning Date _____ Time _____

RABIES shot date _____ Attach certificate copy or note date or tag number _____

Owner's Name(s) _____

Street Address _____ City _____ State _____ Zip _____

Phone Numbers (including area code): Home _____ Work _____ E-mail: _____

Dog's Name: _____ Breed: _____ Sex: _____ Is the dog spayed or neutered? _____

How old is the dog? _____ If you are registering for a puppy class, please tell us your puppy's exact date of birth __/__/__

How old was your dog when you got him/her? _____ Where did you get your dog? _____

Have you ever trained a dog before? _____ Have you attended any other classes here?: Yes: ___ No: ___

What do you feed your dog? _____

Do either you or your dog have any physical handicaps or disabilities which may affect training? _____

If yes, please explain: _____

Circle words, which apply, to your dog:

Growls
Shy
Fearful

Pushy
Bites
Destructive

Hyper
Dominant
Noisy

Not Houstrained
Aggressive- to people
to other dogs /
animals

Percentage of time your dog is: Outside _____% Inside _____% Crated _____% Alone _____%

What do you like best about this dog? _____

What does your dog already know? _____

Who is your Vet? _____ Date of your dog's last distemper/parvo shot _____

How did you hear about our classes? _____

Please read and sign the release below:

Waiver, Assumption of Risk and Agreement to Hold Harmless

I understand that attendance at a dog obedience class is not without risk to myself, members of my family or guests who may attend, or my dog, because some of the dogs to which I (we) will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest of care.

In consideration of, and as an inducement to, the acceptance of my registration for classes, I agree to indemnify and hold harmless, and hereby waive and release the school, its employees, owners or agents from any and all liability of any nature, for injury or damage which I, my family or guests or my dog may suffer, including specifically, but without limitation to, any injury or damage resulting from the action of any dog including my own, and I expressly assume the risk of any such damage or injury while attending any training session or other function of the school, or while on the school grounds or in the building.

I also understand that the degree to which a dog is successfully trained is a function of the interest, commitment, and cooperation of the owner. I acknowledge and agree that there is no guarantee that my dog will achieve the desired level of training, despite the best efforts of the instructor.

Signature _____ Date _____

Signature _____ Date _____

Please have all members of your family who will be attending class sign.
Make checks payable to Canine Connection Dog Training, LLC.
Class fees are not refundable after the start of class.
Thanks -and Happy Training!