

Date: _____



Registration Form

Class Name: _____ Start Date: _____ Number of Sessions: _____

Personal Information

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

Dog Information

Dog's Name: _____ Breed: _____ Dog's Sex: _____

Dog's Age: _____ Spayed or Neutered _____ Proof of Rabies and DHPP required (attach document)

Has your dog ever bitten anyone Y/N? If yes, please describe the situation and any injuries that resulted. _____

Has your dog ever shown signs of aggression towards other dogs or people Y/N? If yes, please describe the circumstances and any injuries that resulted.*

Dog/Training History

Is this your first dog Y/N? If No, please tell us about previous dogs you have owned.

Have you done training with other dogs Y/N? If yes, please tell us what type of training, classes, certifications and such that you and your dog(s) have earned.

Client Name: _____

Date: _____

Professional Fees

Professional Fees shall be \$_____ for a series of _____ sessions, the first of which will be _____ hours, then _____ hour(s) for each remaining visit. "No shows" or cancelled appointments less than 24 hours notice will be counted as one session. All sessions must be completed within 6 months from the date of this contract. Any sessions not completed within that timeframe will be forfeited.

Description of Services

I understand that the trainer with Canine Curriculum will work directly with me and my pet to impart contemporary animal behavior knowledge that best fits our needs and the needs of the dog. Behavior is not static; an animal will not continue to perform even trained behaviors without ongoing practice. A pet's behavior is ultimately the owner's responsibility. Canine Curriculum will make every reasonable effort to help attain the goals but makes no guarantee of performance on the part of the undersigned or pet as a result of providing profession animal training or behavior consultations.

Cancellation Policy

Canine Curriculum reserves the right at any time to discontinue training with a dog if the owner is not complying with proper instructions or the health of the dog or others is at risk without refund. Refunds will be given after the first session ONLY. Should you decide to discontinue anytime after that, you forfeit any refunds and will be considered on a case by case basis and at the sole discretion of Canine Curriculum.

Release of Liability

All dogs are being trained or otherwise handled or cared for by our trainers without liability for loss or damage from disease, death, running away, theft, fire, injury to persons, other dogs or property by said dog or other unavoidable causes.

I/We the undersigned agree that I, my/our heirs, assignees and legal representatives will not make claim against, sue, or attach the property of Canine Curriculum, her family, acquaintances, or any other person acting on her behalf for injury or damage done to or by dog(s) resulting from action or negligence, however caused, by Canine Curriculum or her agents. I/We forever release Canine Curriculum and/or her agents from any and all liability and demands which I/we and my our heirs, assignees and legal representatives may have or may hereafter have for injury or damage to or by dog (s), and assume all risks thereof.

I/We represent to be over the age of 18 years old and I/we are the legal owner of said dog and that said dog has not been exposed to distemper, rabies or kennel cough within the last 30 days. I/We agree to pay for any and all damages as a result of the dog's behavior.

Client Name: _____

Date: _____

Client and Canine Curriculum hereby agree to mediate and / or arbitrate any misunderstanding that may arise pursuant to the terms contained herein. In any action or proceedings arising out of this agreement, the prevailing party shall be entitled to reimbursement of costs and legal fees.

This contract for Training Services supersedes all other agreements, written or oral, previously made between client and Canine Curriculum.

Executed this ____ day of _____, 20__.

CLIENT

CANINE CURRICULUM

Printed Name

Printed Name

Signature

Signature

***IMPORTANT: Aggression or bite history can or may result in Canine Curriculum refusal to accept such dog into a group training session and/or removal of class participation at any time or refusal to accept such dog as a client of any sort. Please let us know all of the details.**