



*Renaissance Dogs, Inc.*

127 Main Rd  
Holden, ME 04429  
207-989-9977

<b>Office Use Only</b>	
Class: _____	Date: _____
Deposit: _____	Final: _____
Rabies expiration: _____	Distemper: _____
<b>Levels Orientation Date:</b> _____	
1 <sup>st</sup> Membership Expires: _____	
Level 1: _____	Level 2: _____
Level 3: _____	Level 4: _____
Renewed on: _____	Expires: _____
Renewed on: _____	Expires: _____

## Training Application

### Owner Information

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ May we add you to our mailing list for upcoming classes/events? Y/N

How did you hear about us? \_\_\_\_\_

Which class are you signing up for? \_\_\_\_\_ Start date? \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Pet Information

Pet Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_

Spayed/Neutered: Y/N Birth date: \_\_\_\_\_ Weight: \_\_\_\_\_ Veterinarian: \_\_\_\_\_

### Terms and Conditions Agreement

1. I certify that my dog is in good health and has not been ill with any communicable condition in the last 30 days.
2. I understand that I am solely responsible for any harm caused by my dog while my dog is attending training at Renaissance Dogs, Inc. or is using any other services provided by Renaissance Dogs, Inc.
3. I further understand and agree that Renaissance Dogs, Inc. and their staff and volunteers will not be liable for any problems that develop provided reasonable care and precautions are followed. I hereby release Renaissance Dogs, Inc., their staff, and volunteers of any liability of any kind whatsoever arising from my dogs' attendance and participation at Renaissance Dogs.
4. I further understand that if I fail to provide proof of current vaccinations or if my dogs' vaccinations are found to be expired or otherwise incomplete, Renaissance Dogs, Inc. has the right to refuse service until current proof is provided.
5. I allow my dog to be photographed, videotaped, and/or used in any media or advertising without prior approval by me. All such photographs, etc. are the property of Renaissance Dogs, Inc.
6. I understand that I am entitled to a refund of the remaining classes after attending the first class if I find I or my dog is not a good fit for the environment, trainer, or class. I further agree that after the first class, there are no refunds.

I certify that I have read and understand the terms and conditions set forth on this page. I agree to abide by the terms and conditions and accept all terms, conditions, and statements of this agreement.

Name of owner (please print): \_\_\_\_\_

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_