



TRAINING CLASS REGISTRATION FORM

Name of Handler(s): _____

Address: _____

Home Phone: _____ Alternate Phone: _____

Email Address: _____

Dog's Name: _____ Breed: _____

Dog's Age: _____ Sex (circle one): M F

Have you ever taken your dog to an obedience class before? (circle one): Yes No

How did you hear about these classes? _____

TRAINING CLASS SELECTION

(PLEASE INDICATE WHICH CLASS YOU ARE REGISTERING FOR)

_____ Salty Dogs (5 weeks): Registration Fee = \$140.00 Class Start Date: 10/12/10

NOTE: CLASSES ARE SUBJECT TO CANCELLATION IF MINIMUM ENROLLMENT IS NOT MET

Please attach fee and a copy of your dog's current vaccination record. All dogs must be current on vaccinations including Rabies, Distemper/Parvo and Bordatella. Proof of vaccination should be in the form of a receipt or other official document from a licensed veterinarian and must be presented to gain entrance into class

Please make checks payable to "Wallis Consulting". The fee is non-refundable once the training session begins. Mail registration to: My Pet Has Issues, P.O. Box 2072, Clay, NY 13041. Please contact Danielle at (315) 420-8833 or danielle@mypethasissues.com with any questions.

Waiver, Agreement & Assumption of Risk: I understand that attending a canine obedience class is not without risk to myself, my dog or members of my family and/or guests who may attend with me because some of the dogs to which I may be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care. I hereby waive and release My Pet Has Issues and Cicero Animal Clinic, their employees and agents from any and all liability of any nature, for injury or damage which myself or my dog may suffer, including specifically, but not limited 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 and while on the grounds of the Cicero Animal Clinic

I hereby agree to indemnify and hold harmless My Pet Has Issues and Cicero Animal Clinic, their employees, and agents from any and all claims or claims by any member of my family or any other person accompanying me to any training session as a result of any action by any dog, including my own.

Signed: _____

Date: _____