

Positive methods guaranteed results, if repeated in the manner we have taught you

Trainer(s): Theresa, Brad, Vida

Trainer AKC CGC ID: 95174



SMP Training Enrollment - Registration Form

Pets Name		Breed	Age
Is your pet neutered/spayed?		Is your pet current on vaccinations?	
Please describe any behavioral issues your pet is having any goals you'd like to work on:			
Pet Parent Information			
Pet Parents Name		Promo:	Phone #
Address:	City:	State:	Zip:
Class Information (please check one)			
S.T.A.R. Puppy Course <input type="radio"/>	Puppy level 1 <input type="radio"/>	Puppy Essentials Pkg <input type="radio"/>	Puppy Complete Pkg <input type="radio"/>
Adult Dog level 1 <input type="radio"/>	Adult Dog level 2 <input type="radio"/>	Dog Essentials Pkg <input type="radio"/>	Dog Complete <input type="radio"/>
GROOMING <input type="radio"/>	Intro to Agility <input type="radio"/>	AKC CGC CLASS <input type="radio"/>	AKC CGC TEST <input type="radio"/>
1-hour Private Lesson <input type="radio"/>	(6) Private Lesson Pkg. <input type="radio"/>	(1) Behavior Modification Lesson <input type="radio"/>	Behavioral Modification Pkg <input type="radio"/>
			TRAINING EVALUATION <input type="radio"/>
3 TRAINING GOALS:			
*Copy of this form *Nylon or leather collar/harness *Treat tote/fanny pack pouch *6ft. nylon or leather leash *Cleanup bags/dispenser bags *Current copy of pet vaccination records			
Start day/date:		Start time:	Trainer(s):

I, the participant (identified below), for myself, my heirs, executors, administrators and assigns, hereby agree to release and hold harmless Santa Monica Paws and it's affiliates, as well as their respective officers, directors, employees, agents and assigns collectively, Santa Monica Paws from any actions, suits, claims, losses and demands of any kind, which, my heirs, executors, administrators, and assigns had, now have, or hereafter may have by reason of any matter arising from or in connection with my participation in the Santa Monica Paws Dog Training class or any other service provided, including without limitation any injury, accident, death or damage to person or property.

In executing this release, it is my intent to expressly waive all rights and benefits conferred upon me by the provisions of section 1542 of the California Civil Code (or any similar state statute) which states:

A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor.

If the participant is under 18 years of age, the parent or legal guardian of the participant must remain in the lesson during the entire training session. If the participant is under 18 years old, I, the undersigned, represent and affirm that I am the parent or legal guardian of the Participant, and I do here by consent and give permission to all the provisions of this release on behalf of the Participant.

REFUND POLICY: A partial (25%) refund will be issued up to the beginning of the second session with a proof of purchase. You will be given a credit towards future services for the remaining unused balance.

I have fully read this agreement and I understand that SMP cannot guarantee that my dog will get trained unless I am 100% cooperative with my trainer(s) recommendations. Additionally, I must follow through with these recommendations daily for the benefit of my dog, or I may not see any long-lasting results.

Name: _____ Date: _____ Witness: _____