



FOR OFFICE USE ONLY:	
DATE & TIME OF CLASS: _____	
TOTAL AMT: _____ DISC: _____	<u>CLASSES</u>
EQUIPMENT: _____	1: _____
PAPER WORK: _____	2: _____
VET. REPORT: _____	3: _____
	4: _____

# DOMINION DOG TRAINING

## BASIC REGISTRATION

OWNER'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE: HOME: \_\_\_\_\_ WORK: \_\_\_\_\_ CELL: \_\_\_\_\_ IS TEXTING OKAY? Y/N

PLACE OF EMPLOYMENT: \_\_\_\_\_ O.K. TO CALL? Y N

PERSON HANDLING THE DOG IN CLASS: \_\_\_\_\_ IF A MINOR, AGE: \_\_\_\_\_  
(A HANDLER 16 YEARS OF AGE AND YOUNGER IS REQUIRED TO HAVE AN ADULT ATTEND THE CLASS WITH SAID MINOR.)

DOG'S NAME: \_\_\_\_\_ DOG'S BREED: \_\_\_\_\_

DOG'S GENDER: M F DOG'S AGE: \_\_\_\_\_ HOW OLD WAS YOUR DOG WHEN YOU ACQUIRED IT? \_\_\_\_\_

WHERE DID YOU ACQUIRE YOUR DOG? (BREEDER, PET SHOP, RESCUE, SHELTER, ETC.) \_\_\_\_\_

IS YOUR DOG SPAYED OR NEUTERED? Y N

IS YOUR DOG AN INSIDE \_\_\_\_\_ OR OUTSIDE \_\_\_\_\_ DOG?

DO YOU REGULARLY LEASH WALK YOUR DOG? Y N

HOW DOES YOUR DOG WALK?: PLEASANT \_\_\_\_\_ TOLERABLE \_\_\_\_\_ AWFUL \_\_\_\_\_

IS YOUR DOG SENSITIVE ABOUT ANY PART OF IT'S BODY? (I.E. TAIL TOUCHED, PAWS HANDLED ETC.) Y N

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

IS YOUR DOG POSSESSIVE OF FOOD OR TOYS? Y N

HAS YOUR DOG EVER BITTEN ANOTHER DOG? Y N

HAS YOUR DOG EVER BITTEN A HUMAN? Y N

IF YES TO ANY OF THE ABOVE PLEASE SPECIFY: \_\_\_\_\_

WHAT IS YOUR DOG TRAINING HISTORY (PLEASE CHECK ALL THAT APPLY):

\_\_\_\_ NO TRAINING \_\_\_\_ BASIC OBEDIENCE CLASS \_\_\_\_ TRAINED YOURSELF \_\_\_\_ PUPPY CLASS

IF YOU'VE ATTENDED OTHER CLASSES, WHERE? \_\_\_\_\_

HOW DID YOU HEAR ABOUT US? \_\_\_\_\_

WHAT DO YOU WANT TO ACCOMPLISH IN THE UPCOMING CLASS? PLEASE BE SPECIFIC:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_



# DOMINION DOG TRAINING

## LIABILITY RELEASE FORM

### PRE-EXISTING CONDITIONS

DO YOU OR YOUR DOG HAVE ANY PRE-EXISTING CONDITIONS THAT MAY HAVE AN IMPACT ON YOUR TRAINING? Y N

IF YES, PLEASE SPECIFY THE CONDITIONS SO WE CAN HELP YOU AND YOUR DOG HAVE THE BEST EXPERIENCE POSSIBLE:

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### VETERINARIAN CONTACT

I HEREBY GIVE PERMISSION TO DOMINION DOG TRAINING, INC., OR ITS REPRESENTATIVES TO CONTACT MY VETERINARIAN CLINIC TO VERIFY MY DOG'S VACCINATION STATUS OR DISCUSS ISSUES THAT MIGHT BE PERTINENT TO OBEDIENCE CLASSES.

INITIAL CONSENT: \_\_\_\_\_

VETERINARIAN CLINIC: \_\_\_\_\_

VETERINARIAN NAME: \_\_\_\_\_

VETERINARIAN PHONE: \_\_\_\_\_

### LIABILITY RELEASE

THE OWNER AGREES THAT DOMINION DOG TRAINING, INC., INSTRUCTORS, ANY REFERRING ORGANIZATION, OTHER PARTICIPANTS, REPRESENTATIVES, OR ASSISTANTS WILL NOT BE LIABLE FOR ANY DAMAGES OR LOSS RESULTING FROM COUNSELING, INSTRUCTION, OR ADVICE SUPPLIED TO THE DOG'S OWNER.

THE DOG'S BEHAVIOR NOW AND IN THE FUTURE IS SOLELY THE RESPONSIBILITY OF THE OWNER OF THE DOG. SHOULD ANY BEHAVIOR ON THE DOG'S PART NOW OR IN THE FUTURE RESULT IN DAMAGES TO PROPERTY, OWNER, OR PERSONS OF SOME THIRD PARTY, THE OWNER AGREES TO ASSUME THE FULL RESPONSIBILITY AND LIABILITY TO SUCH THIRD PARTY FOR ANY AND ALL SUCH DAMAGES AND TO ABSOLVE DOMINION DOG TRAINING, INC., INSTRUCTORS, ANY REFERRING ORGANIZATION, OTHER PARTICIPANTS, REPRESENTATIVES, OR ASSISTANTS FROM ANY AND ALL OBLIGATIONS TO PAY SUCH DAMAGES TO A THIRD PARTY.

OWNER AGREES THAT ANY DOG TRAINED OR OTHERWISE HANDLED BY DOMINION DOG TRAINING, INC., INSTRUCTORS, ANY REFERRING ORGANIZATION, OTHER PARTICIPANTS, REPRESENTATIVES, OR ASSISTANTS ARE NO LIABLE FOR LOSS OR DAMAGE FROM DISEASE, DEATH, RUNNING AWAY, THEFT, FIRE, INJURY TO PERSONS, OTHER DOGS, OTHER ANIMALS OR PROPERTY BY SAID DOG.

OWNER AGREES TO FOLLOW ALL STATE, COUNTY, AND CITY LEASH LAWS AND ALL STATE, COUNTY, AND CITY PET ORDINANCES.

PAYMENT FOR THE CLASSES IS NON-REFUNDABLE AND IT IS THE RESPONSIBILITY OF THE DOG'S OWNER TO ATTEND THE CLASSES AS SCHEDULED. MISSED CLASSES CAN BE MADE UP AT FUTURE CLASSES, BUT OWNER MUST CONSULT DOMINION DOG TRAINING, INC. TO SCHEDULE SAID CLASSES.

ADULTS ARE RESPONSIBLE FOR THEIR MINORS AND AGREE TO KEEP THEM QUIET AND IN CONTROL DURING CLASSES. WE RESERVE THE RIGHT TO ASK ANYONE TO LEAVE THE PREMISES. NO ALCOHOL OR DRUGS ARE ALLOWED ON THE PREMISES OR GROUNDS.

I HAVE READ THE ABOVE CONTRACT AND LIABILITY RELEASE AND AGREE TO ALL TERMS AND CONDITIONS HEREIN.

DOG OWNER'S SIGNATURE: \_\_\_\_\_

DOG OWNER'S NAME (PRINTED): \_\_\_\_\_

DATE: \_\_\_\_\_