

Wags & Barks Application and Agreement for Training Class



General Information

Owner(s) Name: _____ Primary Handler: _____
Address: _____ City: _____ Zip: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Email: _____
How did you hear about us? _____

About Your Dog

Dog's Name: _____ Birthday (or day celebrated): _____ Age: _____
Breed: _____ Male Female Spayed/Neutered? _____
Where did you get your dog? _____
How old was your dog when you brought him home? _____
Do you have other pets? No Yes _____
Has your dog had any obedience training? No Yes – to what level: _____
Any other training? CGC Therapy Dog Agility Rally Flyball Tracking Herding Hunting
What are your goals for your dog? (pet, obedience, agility, hunting, pet therapy) _____

Veterinarian: _____ Phone# _____
Vaccinations: Rabies DHLPP Bordatella
Copy of Vaccination Records has been received by _____ (Wags & Barks staff to initial)

Waiver of Liability

____ I understand that my dog will be in a group setting with other dogs and, that injuries to my dog, myself, family, and guest may occur. I will not hold Wags & Barks Doggy Day Care, LLC, it's members, or staff responsible financially or otherwise for any injuries or illness that may occur to my dog, myself, family, or guest.

____ I assume financial liability for the acts of my dog(s), myself, and family members, and hold Wags & Barks Doggy Day Care, LLC, it's members, and staff harmless there from in case of illness or injury due to my dog or myself, and agree to indemnify Wags & Barks Doggy Day Care, LLC from any claims arising there from.

____ I understand that Wags & Barks Doggy Day Care, LLC has admitted my dog based on my representation of my dog. I have stated that my dog has not harmed or shown aggression towards any person or any other dog.

Signed _____ Date _____