



**New England Pet Partners Inc. 501c.3**  
*Sharing our pets to enhance well-being and education*



## REGISTRATION – TEAM EVALUATION - SATURDAY – 6/27/26

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

Organization: \_\_\_\_\_ Web site: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Animal's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Animal/Species/Breed Type: \_\_\_\_\_

How Long have you had your companion? \_\_\_\_\_

### HELPFUL REMINDERS FOR TEAM EVALUATIONS!

- ◆ Relax! Chill! Take-a-few-deep-nose-to-navel breaths to calm you and your pet
- ◆ Pets must be comfortably restrained by an appropriate collar and leash, and/or carrier, as indicated in your Pet Partner's Team Training Manual
- ◆ Bring your PP Team Handler's Course Certificate of Completion (if not renewal)
  - If the handler is under 16, parent or guardian must accompany with a signed PP form
  - If you are not the animal owner/caretaker/parent, we need written permission
  - Handler's Questionnaire – *Licensed Evaluator is required to review HQ*
  - Bring Vet Wellness (Rabies) health certificate / tag
  - Towel or small blanket if animal is to be carried / gentle brush / choice of treat

**UPON RECEIPT OF YOUR REG FORM, YOU WILL RECEIVE CONFIRMATION - WITH A TIME.**

**LOCATION: 24 Tenney Rd., Pelham, NH 03076-3143, unless otherwise informed.**

**MAILING REG FORM: New England Pet Partners, P.O. Box 534, Pelham, NH 03076-3143**

## Thank you for registering with [NEPP](#) at [PET PARTNERS!](#)

Please fill out this form to help us organize a safe and enjoyable Team Evaluation:

- |  |      |      |
|--|------|------|
| <input type="checkbox"/> Evaluation            | \$30 | EACH |
| <input type="checkbox"/> Renewal or Re-Testing | \$25 | EACH |
| <input type="checkbox"/> Additional animals    | \$20 | EACH |

Time Preference:  early morning  mid-morning  early afternoon  late afternoon

Total evaluations? \_\_\_\_\_ *Each evaluation takes approximately 30 minutes.*

Evaluation times are on a first register / first serve basis.

After you have passed your Team Evaluation, complete your register online at [Pet Partners](#).

Registration information is required for each animal. Organizations with multiple evaluations can use an add-on sheet with information: (Name / Pet Name / Species / Age)

**Payment is required when you arrive (Cash / Check / Credit Card)**

**NEPP Welcomes Donations (Cash / Check / Credit Card)**

**Visit [NEPP](#) for Information regarding sponsorship, events and scholarship.**

### Terms of Agreement

I hold New England Pet Partners, Inc, Dog Talk LLC, and the sponsors of this team evaluation, harmless from and against all claims, losses, liabilities, and damage to persons or property, and attorney's fees arising from any actions at any Pet Partner's Workshops, Event, and Animal-Assisted Activity/Therapy session including, but not limited to, interactions with instructors, licensed evaluators, volunteers, attendees or animals, screening or demonstrations involving my pet, or transportation of my pet, to or from, the testing site or within the site. Please digitally sign if attaching as email (all attendees).

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



A Smile, a Word, a Laugh, a Deep Breath, a Hand Reaching, a Trust, a Step Forward  
a Sense of Well-Being, a Light Shines, a Small Change makes a Big Difference