

Bucks-Mercer Agility Partners, LLC Agility class Application

Owner's Name	Handler (if different)		
	Is handler under 18?	Yes	No
Address	City/Town	State	e Zip
Day/Work Phone Evening Phone	E-mail		
Dog's Name	Breed	D	ate of Birth
Where did you hear about Buck-Mercer Agility Partners?	Vet Past student	Flyer/Ad	Internet
A current rabies certificate is required. BMAP also requi	res proof of Parvo/Distemper	vaccination up to a	and including the first
adult inoculation. Photocopies are acceptable.	urrent Records Attached	Current Reco	rds on file
Veterinarian's Name	Phone	Number	
Has your dog ever bitten a person or dog? Yes N	lo		
If yes, please explain			
Does your dog have any health conditions Yes N	lo		
If			
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- _____ 6:30 7:30 Competition Open
- _____ 7:30 8:30 Competition Open/Excellent
- _____ 8:30 9:30 Competition Novice

BUCKS-MERCER AGILITY PARTNERS, LLC AGRREEMENT TO HOLD HARMLESS WAIVER AND ASSUMPTION OF RISK

I understand that attendance of a dog agility training class is not without risk to me, members of my family or guests who may attend, or to my dog even when dogs are handled with the greatest of care.

I hereby waive and release Bucks –Mercer Agility Partners (hereafter called BMAP), its employees and agents from any and all liability of any nature, for injury or damage which I or my dog may suffer, including specifically, but without limitation, any injury or damage resulting from the actions of any dog, and I expressly assume the risk of such damage or any other functions, of the club, or while on the training grounds or the surrounding area thereto.

In consideration of and as inducement to the acceptance of my application for training by the BMAP, I hereby agree to indemnify and hold harmless BMAP, its 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 or functions of BMAP, or while on the grounds or the surrounding area thereto as a result of any action by a dog, including my own.

I further agree that the BMAP is not responsible for any losses that may occur while I or my family or any guests attend any function of the BMAP. I further acknowledge that Bucks-Mercer Agility Partners has adopted a training policy (specifically referring to handling of dogs that bite or attempt to bite).

The instructor and/or BMAP reserve the right to dismiss from class any handler or dog who, in the instructor's and/or BMAP's opinion exhibits inappropriate behavior.

I, the undersigned, have read the above and do understand this release form and assumption of risk involved.

Dated: _____

Signature of owner or Authorized Agent (In case of minor—a parent or legal guardian)

-----Cut Here. Retain for your records -----

Training Director E-mail contact: <u>janetlb@voicenet.com</u> In the event of bad weather, you will be contacted via email •

MAKE CHECKS PAYABLE TO:

Bucks-Mercer Agility Partners

MAIL TO: Mary Pat Ezzo 3 Woodside Drive Richboro, PA 18954

Cancellations and applications <u>must be</u> in writing to Mary Pat Ezzo at the above address <u>before the 2nd week of the session</u>. Refunds are only made if a withdrawal is made in the first two weeks of class. Confirmations WILL NOT be mailed. Please assume you are in your selected class unless otherwise notified.

SITE ADDRESS: Boxwood Farm 1429 Trenton-Harbourton Rd. (Rte. 579) Pennington, NJ 08534