



## DMB Training Class Registration Form

ALL fields below must be completed

Owner(s) Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

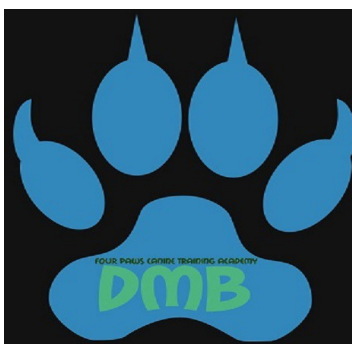
City: \_\_\_\_\_ Zip: \_\_\_\_\_

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Dog's Date Of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: M/F Spayed/Neutered: Y/N Color: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Veterinarian Phone # \_\_\_\_\_

Copy of current shot records must be provided either at orientation or via email submission prior to first class. Puppy/Dog must be current on booster vaccinations or annual vaccinations in accordance with Veterinarian. Bordetella is optional.



## **DMB Four Paws Canine Training Academy Waiver, Assumption of Risk and Agreement to Hold Harmless**

I understand that attendance at a private or group dog training session is not without risk to myself, members of my family or guests who may attend, or my dog, because some of the dogs to which I (we) will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest of care.

In consideration of, and as an inducement to, the acceptance of my registration for a training session or sessions, I agree to indemnify and hold harmless, and hereby release DMB Four Paws Canine Training Academy (herein after known as DMB), its employees, owners or agents from any and all liability of any nature, for injury or damage which I, my family or guests or my dog may suffer, including specifically, but without limitation to, any injury or damage resulting from the action of any dog including my own, and I expressly assume the risk of any such damage or injury while attending any training session or other function of DMB or while on property belonging to DMB or at any other location where classes may be held. I also understand that the degree to which a dog is successfully trained is a function of the interest, commitment, and cooperation of the owner.

I acknowledge and agree that there is no guarantee that my dog will achieve the desired level of training despite the best efforts of the instructor. I understand that I may withdraw from a class and that that all and any fees are non-refundable. I also understand that after starting a class DMB staff may determine a group class is not suitable for my dog for behavioral reasons, in which case DMB will credit the remainder of my class fees for private training or behavior counseling at their current rates.

I understand that should my dog go into a heat cycle or become ill, that I may continue to come to class without my dog, however my dog may not attend class during this time (in the event of private lessons, a rescheduled missed day will be provided). I understand that photographs and video may be taken of me and my dog during classes and allow DMB to use those images in training and promotional materials. All members of your family who will be handling your dog during training sessions must sign below.

Print Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Comments or Concerns You would like to address prior to class: