

Class: _____ **Session:** _____

Bring Rover Over Dog Training Application

Handler Information

Name: _____
Street: _____
City: _____ Zip: _____
Phone: _____ Age (if under 18): _____
E-mail: _____
Trainers under 18 yrs.: _____

How did you learn about our classes?

Dog Information

Name: _____ Age: _____ Sex: F ___ M ___
Breed: _____ Veterinarian: _____
License #: _____ Microchip _____ Tattoo: _____
How long have you had this dog? _____

We need a copy of proof of vaccination for Rabies & Distemper combo.

What you would like to train for:

Walk without pulling	_____	Leave it alone	_____
Heeling	_____	Wait	_____
Sit & Stay	_____	Off the furniture	_____
Down & Stay	_____	No Jumping	_____
Stand & Stay	_____	Come when called	_____

Problems:

House soils	_____	Jumps up	_____	Aggressive	_____
Chewing	_____	Unruly	_____	Biting	_____
Digging	_____	Barking	_____	Fighting	_____
Shy	_____	Car Sick	_____	Mounting	_____
Stealing	_____	Guarding	_____	Stool eating	_____
Runs Away	_____	Picky Eater	_____	Hyperactive	_____

Has your dog ever bitten a person or another dog? _____
How long ago? _____

Agreement to Hold Harmless, Waiver And Assumption of Risk

I understand that attendance of a dog obedience training class 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 will be exposed may be difficult to control and may be the cause of injury even when handled with the greatest amount of care.

I hereby waive and release Bring Rover Over Dog Training herein after referred to as the "Training Organization", its employees, officers, members 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 action of any dog, and I expressly assume the risk of such damage or injury while attending any training session, or any other function of the Training Organization, or while on the training grounds or the surrounding areas thereto.

In consideration of and as inducement to the acceptance of my application for training membership by this Training Organization, I hereby agree to indemnify and hold harmless this Training Organization, its employees, officers, members 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 function of the Training Organization, or while on the training grounds or the surrounding area thereto as a result of any action by any dog, including my own.

During your training class we promise our time, services and advice. You acknowledge that we cannot guarantee any training outcomes during or after this term of agreement. This agreement supersedes any prior agreement and expresses entire agreement.

Signature of Owners or Authorized Agents (Parent or Guardian if under 18) Date

Signature of Owners or Authorized Agents (Parent or Guardian if under 18) Date

Copy received (initial): _____

2nd Class: _____

Session: _____

Signature of Owners or Authorized Agents (Parent or Guardian if under 18) Date

Signature of Owners or Authorized Agents (Parent or Guardian if under 18) Date

Copy received (initial): _____