



# The Academy

POSITIVE DOG TRAINING

Date of Appointment(s): \_\_\_\_\_

**Single Class**

**5 Hr Package**

**12 Hr Package**

## Personal Information

Owner's Name: \_\_\_\_\_

Phone: Home: \_(\_\_\_\_\_)\_\_\_\_\_

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

Work: \_(\_\_\_\_\_)\_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Cell: \_(\_\_\_\_\_)\_\_\_\_\_

## Dog Information

Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age/DOB: \_\_\_\_\_

Sex: M F Neutered Spayed Previous Training: Y N If yes, where or what method:

Is your dog crate trained? Y N Does your dog have allergies? Y N If yes, to what?

Does your dog have any physical ailment that would prevent it from being trained? (Hip Dysplasia, Weight problems, Joint Disease, etc)

Does your dog have any behavioural impediment that would prevent it from being trained? (Aggressive, Fear Responses, Submissive, etc)

What do you hope to accomplish through training?

# I acknowledge...

*that participation in the obedience training of The Academy exposes me to a possible risk of personal injury, including risk to myself, family members, guests and my dog(s) because of the actions of other dogs at the facility, which may be difficult to control, and may be the cause of injury.*

**I agree** that I am participating in The Academy solely at my own risk. I agree to assume all responsibility for the actions of my dog(s). I further agree to hold The Academy, its owners, instructors, presenters, officers, directors, employees, agents, licensees, consultants, independent contractors and affiliates, harmless from any and all liability and from any and all property damage, personal injury an injury to any dog(s), or any other claims arising from or in connection with participation in this program, which may be alleged to have been caused directly or indirectly to any person, dog(s), or thing by the act of my dog while in or upon the training area, or near the entrance there-to.

**I further agree** to hold The Academy and its owners, instructors, presenters, officers, directors, employees, agents, licensees, consultants, independent contractors and affiliates, harmless from any claim for property damage or personal injury to myself, my family or guests and to my dog(s), whether such loss, theft, disappearance, damage, or injury be caused or be alleged to be caused by the negligence of The Academy and it's owners, instructors, presenters, officers, directors, employees, agents, licensees, consultants, independent contractors and affiliates, or by the negligence of any other person or any dog(s), or any other cause or causes.

**I further agree** that this Agreement and Waiver is binding for all programs with The Academy, including this class and any subsequent classes that I may attend. I acknowledge that I have read and fully understand this Waiver and Agreement. I acknowledge that this Agreement is binding on me, my spouse, my children, my legal representatives and my estate.

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Signature of Primary Owner or Handler

(in case of a minor, a parent or legal guardian must sign)

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Signature of Witness

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Printed Name

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Printed Name

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Date

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Date